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JPRS Report

Epidemiology



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Epidemiology

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INTER-AFRICAN

Locust Invasion Threatens Sahel

54000120 Dakar SUD in French March 1988 p 21

[Article by Babacar Toure]

[Text] The alarm has already been sounded. A new invasion of locusts is in the making. It is difficult to attack them at their starting point in the Western Sahara. And the organization that used to go after them (OCLALAV) is now gone. More than ever, the well-being of the Sahel is going to depend on international aid.

Is the sub-region once again this season going to be subjected to the effects of the destruction of ground-cover, pasture-land and harvests? Unless concerted, united action is taken right away to stem the risk of an invasion by migratory locusts already identified in northern Mauritania, that part of the Sahel could suffer widespread damage.

The dense concentrations of the swarms spotted since the end of last year in the regions of Tagant and Tiris Zemmour threaten the very existence of more than 300,000 camels in that pasturage zone. Experts predict that with the arrival of the dry season, which lasts from August to May, the southernmost areas—Senegal and some others—will be invaded by the locusts, unless something is done about it before then.

Mauritania, for its part, has already gone into action on a number of fronts. A dozen control units are already in the field in infested zones.

The ambassadors accredited to Nouakchott have been made aware of the danger by the Mauritanian minister of agriculture, Mr Messaoud Boukheir. Firm commitments have already been made by the Western countries and by certain specialized agencies of the United Nations. The EEC countries, including France, the Federal Republic of Germany, and Italy, as well as the FAO, the UNDP and USAID have already contributed to the efforts now under way and have also made further commitments. Morocco, for its part, has provided resources to the Joint Organization for the War Against Locusts (OCLALAV) which could supplement efforts at the national level.

However, the steps undertaken in Mauritania may be thwarted by the presence of concentrations of locusts at all stages of development in Western Sahara. While it may be wishful thinking to imagine concerted action being taken by Morocco, Algeria and the POLISARIO against these new invaders, it is nevertheless a matter of urgency to invite the specialized organizations to get involved, in accordance with modalities acceptable to the protagonists of a conflict whose importance pales before the devastating consequences of the locust migration.

Specific Problem

Our countries, individually powerless in the face of a danger of such scope, have never faced greater need for collective action, concerted and coordinated at the regional level. And yet it is at just such a time that the member countries of OCLALAV, encouraged to do so by their Western partners, have proceeded to do away with the joint organization which was already on its last legs. The responsibilities were allocated: the African states did not fulfill their pledged contributions. The Western partners withdrew their support from OCLALAV in order to break up the multilateral organization and return to a form of unequal bilateral cooperation between David and Goliath. The next board of directors meeting is expected to be devoted to dissolving OCLALAV, leaving it nothing but an "organizational shell." How could such a structure interface with the CILSS "cell," and what will become of the mass of expertise accumulated over the years by OCLALAV?

This specific problem once more lays bare the poor policies and extraversion of African approaches.

The threat of the onset of an invasion cycle that could last for 5 or 6 years and devastate agriculture in the sub-region is a revelation in that regard. One more revelation.

09516

New Scientific Methods To Control Cassava Pests Described

54000127 Enugu DAILY STAR in English
17 Apr 88 p 3

[Article: "Controlling Pests Biologically"]

[Text] (Controlling pests chemically—despite adverse environment implications—is the trend for many African farmers. Tanzanian researchers are experimenting with a new method).

Production of cassava throughout Africa is threatened by two pests but chemical control of these pests is not practical, as it requires frequent application of costly and highly toxic pesticides. This renders the approach environmentally unsound for use on this subsistence crop.

The two pests, the cassava mealybug and the cassava green mite, both of which were introduced accidentally, and separately, from the South America in the early 1970's, have since spread and have affected all 28 cassava-growing countries in Africa.

However, not all hope is lost to combat the pests as an integrated approach has been found effective which combines classical biological control with improved agronomic practices and the use of healthy planting materials.

According to findings from the Mt. Makulu agricultural research station in Lusaka, Zambia, classical biological control involves the use of natural enemies of an introduced pest brought from the pest's own area of origin. The know-how is based on research findings from South America where neither cassava green mite nor cassava mealy bug are serious pests because both are kept in check by a variety of natural enemies.

Following careful study to ensure that these natural enemies attack only the target pest and cause no harmful side effects, they are introduced to Africa where they are able to control the pests.

Relatively small numbers of natural enemies are introduced initially but these increase naturally.

As the pest is reduced to a harmless level, the numbers of natural enemies also fall to a low level. The first impact of the natural enemies may be seen as early as one year after their releases.

Natural enemies subsequently spread from field to field but their dispersal over longer distances can be hastened by supplementary releases.

Following their establishment, natural enemies remain in a natural balance, permanently controlling the pest, unless this balance is upset by such factors as inappropriate pesticide use.

According to researchers in Zambia, classical biological control is permanent, cost effective and environmentally sound; this approach has been successfully used throughout the world for many years to control a wide variety of harmful pests.

In order to assist countries with the control of cassava mealy bug and cassava green mite, the Africa-wide Biological Control Programme (ABCP), an affiliate of the International Institute of Tropical Agriculture (IITA), has been set up under the umbrella of the Organisation of African Unity (OAU).

Financing and support are provided by the international donor community and the United Nations Food and Agriculture Organisation (FAO).

Since 1981, over 150 releases of the mealy bug's natural enemies have been made in 13 African countries. In West Africa and Zaire, where the earliest releases were made, effective control of cassava mealy bug has already been achieved.

Efforts are also continuing in the spread of the mealy bug's natural enemies throughout the remaining affected countries, and to find an equally effective control for cassava green mite.

Natural enemies are produced at the ABCP headquarters in Nigeria and then distributed by air to affected countries.

On arrival, natural enemies are either released by researchers on the ground or dropped at low levels into cassava fields using ABCP's own specially-equipped aeroplane.

On the basis of experience elsewhere in Africa, it is expected that biological control, combined with improved farming practices, will provide an effective and permanent solution to the problems caused by these devastating cassava pests.

/12223

MOZAMBIQUE

National Anti-AIDS Program Receives International Assistance

54000135 Maputo NOTICIAS in Portuguese
21 Apr 88 p 1

[Article by Anselmo Tembe]

[Excerpt] The international community has pledged \$4,290,000 (almost 2 billion meticals) to support the National AIDS Prevention and Control Program in Mozambique. The sum, according to the document signed at the donors conference, will provide the funds needed for the first year of the program.

The pledge by the international community was announced yesterday in Maputo during the final working session of the donors conference attended by representatives from 31 countries, United Nations agencies, and government and nongovernment organizations. The conference was underway since last Tuesday.

According to the final document, some of the donors pledged assistance to subsequent years of activities by the National AIDS Prevention and Control Program. The purpose of the Maputo meeting was to mobilize needed international support for our country's anti-AIDS campaign. The program will continue until 1991 and its budget is estimated at \$7.2 million.

The program has as its goal the reduction of sexually transmitted AIDS disease, through an intensive health program, early detection and the care of persons affected by the AIDS virus, systematic analysis of donated blood and blood products, correct sterilization methods, prevention of mother-to-child transmission, and other research on the disease.

The minister of health, Dr Fernando Vaz, who hosted the conference, said in his closing address that the countries and organizations present were aware of the worthiness of Mozambique's health policy and the appropriateness of the anti-AIDS program. "The

resources made available to the National AIDS Prevention Program will also help the National Health Service since, as a result, we will be able to be more realistic. This means that without forgetting our other daily problems (malaria, tuberculosis, malnutrition, parasites, vaccination coverage, high infant mortality, etc.) we will also be able to combine forces in our health programs and guarantee the correct prevention methods against AIDS," the health minister said.

Before the closing session, the donor countries and organizations announced the ways in which their assistance would be channeled through the Ministry of Health Sector 19.

Figures On Annual Pest Damage To Crops Given
54000133a Maputo NOTICIAS in Portuguese
27 Apr 88 p 5

[Text] The annual economic damage to food crops from insect plagues or diseases is estimated at \$74 million. According to a report by the Plant Protection Department of the National Agriculture Investigation Institute (INIA), approximately \$10 million are spent annually to import pesticides. The report estimated that food crop losses, as a result of plagues and contagious diseases, reach 40 percent.

800,000 hectares of corn, of a total of 120,000 tons are lost due to plagues and diseases. In the case of rice, 11,000 tons are lost annually from a 132,000-hectare infected area. In the case of peanuts, a 150,000-hectare affected area means a loss of 45,000 tons. The report says that decline in production is being felt and is mainly due to lack of technical knowledge and inability to test pesticides. The first seminar of INIA, which has been underway since 18 April, is planning to create an Agricultural Investigation Center to address the demands of the Economic Recovery Program and the food crisis faced by Mozambique.

Insect Plague Attacks Rice Crops in Beira
54000133b Maputo NOTICIAS in Portuguese
20 Apr 88 p 3

[Text] An insect plague is devastating hundreds of hectares of rice in the Beira city lowlands, threatening to spread to other areas and jeopardize the harvest.

According to reports from the chief of the MONAP-2 Rural Extension Department, Valdemar Jorge, the plague is called "rice stalk borer" and appeared following the intense rains which fell during the first quarter of the year, particularly in March. This triggered the exaggerated and rapid growth of the tall grasses (to which the plague was first attracted).

He told our Beira correspondent that the family sector was most affected by the plague and that the rural extension sector is seeing to it that the farmers adhere to certain rules to prevent the spread of the plague to other crops.

The agricultural provincial services are distributing simple methods of prevention to the farmers. The application of pesticides would be a danger to the people since they are extremely toxic and adequate safety gear is not available, namely boots and uniforms, said Valdemar Jorge. There is a possibility that water wells on the periphery of the fields could become poisoned if Dimicron is applied. The only prevention method left is to pull out the stems which are infected when the plague is still in its embryonic stage.

NIGERIA

Federal Government Praised Over Anti-AIDS Measures
54000134 Lagos DAILY TIMES in English
16 Apr 88 p 16

[Article by Femi Ajayi and Femi Odubiro]

[Text] The Federal Government has been commended for taking measures to contain the spread of the dreaded Acquired Immune Deficiency Syndrome (AIDS) virus (HIV) pandemic in the country.

In a paper titled "Nigeria's reaction to Human Immunodeficiency Virus (HIV) problems" at the end of a three-day workshop on AIDS in Lagos, the chairman of the National Advisory Committee on AIDS (NACA), Professor E.M. Essien, said "Nigerian Government is one of the few countries in the world that anticipate the HIV pandemic and took clear-cut plans even before its arrival on its shores."

According to him, one of the government's steps aimed at investigating whether there is HIV infection in the country and also to design strategies to combat its spread (if any) in the country was the inauguration of an 18-member committee by the Health Minister Professor Olikoye Ransome-Kuti on June 24, 1986.

Professor Essien, however, recalled that the ministry, apart from the selection of the competent medical expertise, also made available nine laboratory facilities which include two confirmatory tests on screened blood samples in seven locations in the country, adding that "There are plans by the Health Minister to establish 12 other centres before the end of June."

While accounting for the adequate utilization of such equipment entrusted with the NACA, Prof. Essien gave the statistics of the tested blood groups from all states of the country as at February to be 99.7 percent.

The mean percent breakdown were blood donors (those people that donated blood free in hospitals) 57.3 patients (whose blood were examined for diagnosis) amount to 16 prostitutes 2.9 while that of prisoners was put at 9.3 percent.

Others are volunteers (those Nigerians who donated their blood purposely for the committee research).

/9738

Measles Epidemic Hits Plateau State Despite Vaccination

54000128 *Lagos DAILY TIMES in English*
2 Apr 88 p 2

[Text] One person has died and many others admitted at the Jose University Teaching Hospital (JUTH), Plateau and Jankwanu hospitals in Jos following an outbreak of measles, an investigation conducted by the NAN has shown.

According to the investigation, three-quarters of those on admission had previously been vaccinated against the disease under the EPI programme, including children between the ages of five and 18.

Available statistics showed that while 26 children were admitted throughout last year with four deaths, 21 children were on admission at the JUTH, with one death.

Asked to comment on why those previously vaccinated were afflicted by the disease, Dr Emmanuel Miri, the principal chief medical officer in the state ministry of health, said it was likely that the affected persons received their vaccination outside government hospitals.

"While we are sure of the potency of the vaccines, in government stores, we cannot say so of those used by private clinics and hospitals over which we have no control," he said.

/9274

Nation-wide Immunization To Fight Against Killer Diseases

54000125 *Lagos NEWSWATCH in English*
21 Mar 88 p 23

[Article by Louisa Aguiyi-Ironsi: "Battle Against Killer Diseases"]

[Text] The prospects of a healthier future for the Nigerian child looked brighter as the first phase of the nation-wide immunisation exercise took off last week. The nine-day programme is targeting 3.8 million children to be vaccinated against childhood killer diseases, which claim the lives of 200,000 children each year in Nigeria.

Pregnant women were also administered with tetanus toxoid. At the Onikan Health Centre in Ikoyi, 100 children were immunised during the same period. At the Agege Maternity Centre, less than 100 children were vaccinated. Olufunmilayo Banjo, a nursing officer who manned the Child Health Clinic at Obalende, says that when compared with the regular immunisation days at the clinic, the turn-out was impressive. She, however, established from her interviews with the mothers that there is a general apathy among them.

The biggest problem vaccinators faced, according to Banjo, was having to determine what vaccines to administer to the children. Most mothers, who started with the schedule of immunisation, said that they lost their cards which showed the children's record. Except the child has such records, Banjo said, the child would not be vaccinated for fear of giving the child an overdose.

The fact that the immunisation centres in Lagos are not overcrowded may be because Lagos State has recorded 80 percent immunisation coverage. Reports from some of the states indicate that the response has been enormous, as state governors and health ministers collaborating with the Federal Government, embarked upon an unprecedented mass mobilisation of the people. Bendel State and Imo State voted 1 million naira each for the project. Some states declared the national immunisation period or NID work-free days for mothers. The non-governmental organisations like UNICEF, WHO and various professional organisations contributed money and professional services. Voluntary organisations like the Red Cross Society, Boys Scouts and Girls Guides were also represented in the mass immunisation campaign. The 11,000 members of the Rotary Club of Nigeria, the initiators of the project, assisted the campaign with vehicles to convey the health personnel carrying out the exercise.

The expanded programme on immunisation, EPI, launched in October 1984, fell short of its target of 60 percent immunisation level by December 1987. By that date, Nigeria recorded a discouraging average of 25 percent coverage. Gabon, Gambia, Liberia, which have similar programmes, have achieved coverage as high as 70 percent. The goal of the NID committee, according to Mike Okwechime, its chairman, is to accelerate the immunisation coverage to 60 percent.

It is hoped that the NID project will reach the rural areas where coverage is lowest and where, two-thirds of the country's mothers and children have no access to health services. Only then, according to a UNICEF report, can the country be brought close to the goal of universal immunisation by 1990. Tuberculosis, measles, diphtheria, whooping cough, tetanus and polio, the six foremost killers of children, will then go the way of smallpox, which was eradicated through mass vaccination more than 10 years ago.

/12223

SOUTH AFRICA

AIDS Cases Up by Almost 14 Percent in 1988

54000117 Johannesburg BEELD in Afrikaans
8 Mar 88 p 4

[Text] The number of AIDS cases in South Africa has increased since the beginning of this year by an enormous 13.75 percent.

This year, 11 new cases have been reported, to bring the total since 1982 up to 91. Six AIDS sufferers have died this year alone.

The latest AIDS death was that of former CAPAB [Cape Performing Arts Board] ballet dancer, Johan Swart, 34, of Cape Town.

According to a statement issued yesterday by the Department of National Health, 59 South Africans have already died of AIDS. This is 65 percent of the total number of sufferers.

A spokesman for the department said in response to a question that the number of heterosexuals with AIDS has doubled since the end of last year.

Between 1982 and 31 December 1987, five heterosexual people contracted AIDS. In the past 2 months, another five cases of AIDS have been diagnosed among heterosexuals.

Last year, an average of three cases of AIDS were reported each month (for a total of 37 cases). From the latest figures, it can be seen that this figure has risen to 5.5 cases a month in the short time that has already passed this year.

The 91 cases thus far diagnosed break down into the following:

- 83 white men;
- 3 women;
- 72 homosexuals or bisexuals;
- 8 coloreds.

12271

Thousands of Children in Natal, KwaZulu
Immunized Against Polio
54000129 Durban THE DAILY NEWS in English
21 Mar 88 p 5

[Article by medical reporter Laura Nelson]

[Excerpt] Thousands of children throughout Natal and KwaZulu have been immunised against polio last week in a determined drive by health authorities to stamp out the disease.

The campaign has been carried out by the Department of National Health and Population Development and the KwaZulu Health Department.

"We've had a tremendous response—in spite of the rain," a spokesman for the Department of National Health and Population Development said at the weekend.

"It's been an intensive campaign. We've held clinics all over Natal and particularly in the coastal areas where we had the greatest number of cases."

She said these included areas between Hlabisa on the South Coast and the Transkei border, as well as in the Pietermaritzburg/Edendale area inland.

"Local authorities have also been tremendous in coping with the large numbers," the spokesman said.

Another intensive immunisation campaign will be carried out in certain areas this week.

"There will be a repeat session in the Umgababa, Illovo and Karridene areas on the South Coast. We held clinics in these areas last week and although there was a good response, we feel some people didn't come forward because of the rainy weather," the spokesman said.

Busiest station

"At Lindelani clinic, above Ntuzuma, 2,201 children were done in one morning. This response has been extremely good and we hope the weather holds."

However, she said transport was often a problem and there was a need for more four-wheel drive vehicles.

According to statistics from the Department of National Health and Population Development, there has been a drop in the number of polio cases in Natal.

Between March 10 and last Friday, there were only three new hospital admissions.

This brings the number of hospital cases since the outbreak of the epidemic in December to 217. There have been 23 deaths.

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AFRICA (SUB-SAHARA)

At King Edward VIII Hospital in Durban, there are 11 polio patients. Seven of them are on respirators and four are in general wards.

A few days ago, a patient was brought from Clairwood Hospital after his condition deteriorated.

The latest admission was a 3-1/2-year-old girl from Umbumbulu who was brought to the hospital on Wednesday.

/9738

AIDS Test, Incidence, Undertakers' Fears Examined

Test for Antigen

54200038 Vancouver *THE SUN* in English
21 Mar 88 p A7

[Text] Winnipeg—A Winnipeg doctor says the first laboratory tests made in Canada to detect the actual AIDS virus works.

Dr. Laila Sekla, who ran an analysis for the Montreal drug firm that developed the test, says it is better than current methods that only detect exposure to the fatal syndrome transmitted sexually and through blood and blood products.

"It's really almost detecting the virus," said Sekla, a research doctor at the Cadham Provincial Laboratory, the only facility in Manitoba allowed to perform AIDS testing.

Sekla, who worked with the product last September, said it analyses blood samples for the presence of AIDS antigens, the portion of the virus that triggers the body's immune system to produce antibodies.

Her tests on 121 people showed that 15 had the virus. It cleared 41 others who were high-risk candidates but didn't have AIDS antibodies. As well, the test verified the accurate results of current testing methods, she said.

"We're feeling very confident it will be useful," she said.

A spokesman for the federal health and welfare department, which licenses AIDS tests and other medical devices, said the test shows a lot of promise.

Nirmala Chopra said the new test removes the uncertainty of existing tests by detecting the presence of the virus in a victim.

But Chopra said the test will not be licensed until the federal government is satisfied with its manufacturer's claims, a review process that can take several months.

Ottawa is still verifying data and sample test kits sent in November by drug manufacturer Abbott Laboratories Ltd., which developed the product a year ago at its Mississauga, Ont., research lab, said Abbott marketing manager Graham Tolfree.

Sekla said the current AIDS test, ELISA, and a second back-up test, only detect antibodies produced after exposure to acquired immune deficiency syndrome.

Chances are that someone with antibody-positive results has the virus but there is no certainty, and it can take up to five years for someone with the antibodies to develop full-blown AIDS, Sekla said.

British Columbia Incidence, Measures

54200038 Vancouver *THE SUN* in English
22 Mar 88 p A9

[Article by Tom Barrett]

[Text] Victoria—The rate of increase in AIDS cases is slowing, Dr. Michael Rekart said Monday.

His comment came with the introduction of a comprehensive government information package on AIDS in the workplace.

Rekart, director of the government's division of sexually transmitted diseases, told reporters AIDS is still spreading, but the number of cases is not increasing as quickly as previously.

Rekart said there have been 336 cases of AIDS identified in B.C. since the first one surfaced in February of 1983. Of those, 180 have died.

From 1983 to 1986, the number of cases doubled annually, Rekart said.

"In 1986 we had 105 new cases, in 1987 we had 121," he said. This year, "if trends continue we'll probably have 130 new cases."

There have been 23 new cases identified so far this year, Rekart said.

"The definition of an epidemic is the occurrence of a disease beyond which you can predict," he said. "And I think we can basically predict what's going to happen in the next year or so... By definition it's not an epidemic, but it still is spreading."

Dueck told reporters the government will aim an information blitz at workers and their employers to combat fears about AIDS in the workplace.

The program is part of the government's \$1.4-million AIDS education program.

A key recommendation contained in a pamphlet to be distributed to employers recommends against mandatory testing of employees or job applicants because a test for acquired immune deficiency syndrome is not fool-proof.

"Much of the apprehension about AIDS in the workplace, to a very great extent, has been unfounded, and this is the message we will try to get across to employers and employees," Dueck told a news conference.

He said health units throughout the province will be instructed to make a wide range of medical data and information available to employers' organizations, trade unions and professional associations.

The program consists of a manager's manual, an employee's pamphlet, and a pamphlet for higher-risk occupations such as police, ambulance attendants and medical professionals.

A booklet for employers states: "For you the employer, the question is probably not, 'Will one of my employees be affected?' but rather, 'When will it happen and what impact will it have on the company?'"

The booklet adds there are "numerous hidden costs" to companies from AIDS.

"There are the costs of lost productivity from the affected employee, family members and concerned friends. There are as well the costs of workplace disruptions that can occur if other employees learn that a co-worker is infected and panic, refusing to share the same workplace or insisting on extraordinary safeguards."

Undertakers' Fears

54200038 Toronto *THE GLOBE AND MAIL* in English 4 Apr 88 p A3

[Text] A growing fear of AIDS infection has spread to funeral homes across Canada, with some undertakers wanting more protection and others refusing to handle the bodies of people who have died from AIDS-related ailments.

In Halifax, the Nova Scotia Embalmers Association wants bodies of people who have died of such infectious diseases to bear labels with bold, five-centimeter-high lettering spelling out the nature of the illness.

AIDS Vancouver received a call from someone in the funeral business who said there was a movement to have all victims of acquired immune deficiency syndrome buried in metal containers, said Michael Welsh, a spokesman for the group. He said some homes will only cremate such victims.

"I wouldn't touch them with a 10-foot pole," said Bert Landriault, funeral director of Roselawn Funeral Home in Vancouver. "It's too new a disease. They don't pay us enough money."

Mr. Landriault's attitude is spreading to funeral homes across Canada, Philip Shaw, spokesman for the AIDS Committee of Toronto, said. "There's only a small number of funeral homes that we can refer people to, even here in Toronto."

He said undertakers are afraid they will contract AIDS through exposure to blood, semen and other bodily fluids during embalming and disposal processes.

It is a fear based on fact because bodily fluids from recently deceased AIDS sufferers are infectious, Douglas Enright, a spokesman for the Ontario Ministry of Health, said.

However, Andy Doyle, a spokesman for the Ontario Funeral Directors Association—whose members handle 80 percent of all deaths in the province—said most undertakers accept the risk as part of the job.

"I can understand the feelings of some funeral directors, but I do not know of any cases where we have refused to prepare an AIDS victim for viewing," he said.

Mr. Doyle said both the federal and provincial governments have issued directors with guidelines on the proper handling of victims of the AIDS virus, which attacks the body's immune system.

Despite the guidelines, a growing number of funeral directors are expressing reservations about handling the bodies of people with AIDS.

In St. Catharines, Ont., one funeral director quit his job to lobby against area doctors who do not warn embalmers about diseases such as AIDS in bodies they prepare for burial or cremation.

/9738

Gonorrhea Infection Rise Reported Among Teen-age Girls

54200039 Ottawa *THE OTTAWA CITIZEN* in English 6 Apr 88 p A14

[Excerpt] More teen-age girls are getting gonorrhea, bucking an overall decline in this venereal disease in Canada, federal officials say.

"These young women probably feel they are immune," Gordon Jessamine of the federal Laboratory Centre for Disease Control said Tuesday.

Traditionally, the highest rate of gonorrhea infection has occurred in men between the ages of 20 and 24.

The rate of gonorrhea infection among women aged 15 to 19 decreased between 1982 and 1983, but then began to rise. The 1983 rate was 523 cases per 100,000 and by 1986 was 543 cases per 100,000, an increase of almost four percent.

"If no change occurs in the behavior patterns of women 15 to 19 within two to five years... we anticipate that this group of young women will have the highest rate of gonococcal infection in all age groups and sexes," Jessamine said.

/9738

Adverse Reactions Prompt Review of DPT Vaccine

54200040 Toronto *THE GLOBE AND MAIL* in English 1 Apr 88 p A9

[Article by Lawrence Surtees]

[Text] An Alberta study has found a dramatic increase since 1985 in negative reactions to a diphtheria, pertussis (whooping cough) and tetanus vaccine after children get the fourth and fifth booster shots.

The adverse reactions are causing the vaccine maker to consider changing the amount of tetanus toxin used.

The three-part vaccine, known as DPT, is made by Connaught Laboratories Ltd. of Toronto and is used throughout North America.

The study considered only "local" reactions to the vaccine—relatively mild side effects seen at the injection site.

They take the form of redness and swelling and are usually caused by the tetanus toxin in the vaccine, said Dr. John Waters, director of communicable disease control and epidemiology at the Alberta Department of Community and Occupational Health, and author of the study.

The study, done last summer, was published last week by the federal Department of Health and Welfare.

Dr. Waters said in an interview that the study is the first to analyze a group of children who have been inoculated with only the "adsorb" type of DPT vaccine made by Connaught since 1980.

The DPT has an adsorbing agent added that increases the body's immune reaction to it. Although this results in the body producing more disease-fighting antibodies, it may also increase the likelihood of side effects, Dr. Waters said. A complete inoculation cycle for DPT takes up to six years, which is why it has taken almost seven years to develop evidence that attributes side effects to the adsorb type of vaccine.

Children receive the first three shots at the age of about 2, 4 and 6 months. The fourth shot is given between the ages of 15 and 18 months and the fifth at between 4 and 6 years.

Dr. Waters began a more detailed study of children in four provincial health units who completed DPT inoculation last summer after he noticed a rising incidence in adverse reactions reported to his department since 1985.

He also questioned why most of the reactions reported were after the fourth and fifth booster shots.

Incomplete data up to the summer of 1987 showed 801 severe local reactions to tetanus-toxin products after the fourth and fifth shots, compared with 484 in 1986, 86 in 1985 and 25 in 1984.

Dr. Waters' more detailed study of 669 children found that 436, or 65 percent, of children had mild reactions and 76, or more than 11 percent, reported more severe reactions.

"Although mild local reactions to tetanus toxin are to be expected in many cases, we find that an incidence of serious reactions in more than 1 in 10 cases to be of concern," Dr. Waters said.

Laboratory tests of tetanus antibody levels in some children were obtained and in some cases were more than 100 to 200 times the necessary level, Dr. Waters said.

He believes the problem can be alleviated by increasing the time interval between vaccines, reducing the number of immunization boosters, or changing the amount of tetanus toxin level used.

Connaught Labs is studying all of those options, said Dr. Garry Humphreys, medical director at Connaught.

The company has begun a series of animal tests to determine the effects of changing either the number of boosters or the immunization schedule. "We will begin a further series of human clinical studies by the end of the year," Dr. Humphreys said.

Although altering the immunization schedule may reduce the effect of the tetanus toxin, it may reduce the ability of the vaccine to confer resistance to the other two diseases, Dr. Humphreys said.

"We believe the preferable course is to reduce the tetanus toxin level if we determine that there is too much used and whether we can reduce it," he said.

/9738

Xinjiang Bringing Some Diseases Under Control

OW0905223288 Beijing XINHUA in English
1220 GMT 9 May 88

[Text] Urumqi, May 9 (XINHUA)—Doctors in Xinjiang Uygur Autonomous Region have brought leprosy and other endemic disease under control, XINHUA learned today.

Leprosy should be basically wiped out by 1995, said regional health officials here today, adding that the incidence of the disease dropped from 0.13 Per thousand in the 1960's to 0.02 Per thousand last year.

Goitre used to be rampant in 80 counties, especially in ten counties round the Tarim basin. Now it has been brought under control in 14 counties.

The officials attributed the success to the setting up of 20 factories producing iodized salt to benefit a total of six million people.

Besides, 360,000 people now benefit from projects built since 1980 to divert clean water to areas where drinking water has a high content of fluorine.

AUSTRALIA

AIDS Council Reviews Success of 'Grim Reaper' Awareness Campaign

54004317 Sydney *THE SYDNEY MORNING HERALD* in English 29 Mar 88 p 13

[Article by Jill Margo: "The Grim Reaper Started the AIDS Ball Rolling"]

Jill Margo looks at the lessons the Grim Reaper advertisements had for the fight against AIDS.

[Text] As the National Council on AIDS gears up to launch a new offensive, it has looked back to the Grim Reaper campaign and claimed it "a success beyond expectation". Professor Ron Penny, the chief Commonwealth education and services adviser on AIDS, has reviewed the campaign and says the fact that people are still talking about it, 12 months later, demonstrates it achieved its goal.

"The Grim Reaper was designed to increase public awareness about AIDS. It was basically to put AIDS on the public agenda. Now, anyone who says it has not done that has missed the point," he says.

Last week, the Federal Minister for Health, Dr Blewett, announced the fusion of the AIDS taskforce and NACAIDS into a single body called the National Council on AIDS. The taskforce had been responsible for the medical side and NACAIDS for the community and educational aspects of the battle against AIDS.

The Grim Reaper advertisement ran officially for 10 days on national television last April. However, because of the controversy it generated, it lived on in the media for months afterwards.

Although it was never admitted at the time, it was intentionally designed to create a positive controversy.

"It did precisely what the agency wanted it to do," says Quentin Murno, the managing director of Grey Advertising, which conceived it. "We reckoned the only way to get people to talk about AIDS in a meaningful way was to get them to talk about the ad."

When his agency was first briefed by the then NACAIDS, in November 1986, its research showed that while many people were aware of AIDS, they did not feel it affected them. It was like another famine in Ethiopia; it had not had an impact on their lives.

"We needed to pour a bucket of cold water over the heads of Australians to shake them out of their complacency. Before we could get them to open their minds, we had to get their attention."

The Grim Reaper got attention. Australian Market Research found 97 per cent of the population saw the commercial.

As the council deals with the delicate details of sex and with the habits of illegal drug users, it expects any explicit campaign it runs will meet with opposition. It's fairly predictable if the forthcoming campaign which, among things, will try "to socialise the condom" will evoke some strong reactions.

This campaign will signal a third phase in the fight against the disease.

The first, spearheaded by the Grim Reaper, was designed to make people aware. The next phase, which involved millions of brochures and print adverts, aimed at giving people information so they could assess their own risk.

The new campaign will try to induce behavioural changes. This will begin with a poster campaign on public transport, giving instant messages to keep AIDS in the public mind.

Posters on external bus panels will carry short sharp messages about the dangers from AIDS and adverts inside will challenge people and their behaviour.

"It will be starting the job of trying to socialise the condom—showing the condom as one of the best vehicles for safer sex," says Graham Edwards of Magnus Nankervis and Curl, the agency running this campaign. "Some of the messages on the bus side will be distasteful, but then death is distasteful."

He said there will be an attempt to get youths to use condoms and their parents to accept the fact that they have to use them.

The council has other initiatives planned. It believes the business community must realise it has a role to provide information and education in the workforce. Special brochures are being inserted into business magazines carrying this message. They will be modelled on brochures put into the *READER'S DIGEST* in 1986.

Another campaign will target the tertiary education sector as a population at risk from AIDS and new initiatives for youth and intravenous drug users are in the pipeline.

A study published in the *MEDICAL JOURNAL OF AUSTRALIA* yesterday on the effects of the Grim Reaper campaign on the Albion Street AIDS Centre found it had been slightly off target.

People who were not perceived to be at risk at the time had responded by asking for testing while at-risk groups did not respond.

Andrew Morlet, a research co-ordinator at Albion Street, who conducted the study with others, said yesterday the Grim Reaper achieved its stated aim of putting AIDS on the public agenda, but did not lead to any obvious behavioural changes.

He said that as it had aroused the community to such a point it might have been more effective to follow up sooner with another campaign, of the same intensity, targeting risk groups.

Professor Penny, a former chairman of NACAIDS, is emphatic that the campaign was never intended to change behaviour. "No ad in the world, run over 10 days, could be expected to change behaviour relating to sex and drug usage." Rather the ad proved "an incredibly valuable mechanism" for making people talk about AIDS.

It prompted parents and teachers to request AIDS education in schools and now sex and condom use were being freely discussed.

He said that criticism that it was aimed at the general community and not target groups was not entirely valid because research showed the disease would spread to the heterosexual community through intravenous drug users and bisexuals. All the evidence showed it could be transmitted heterosexually.

The criticism that the advertisement used all funds available so there was nothing left for a follow-up was entirely incorrect, he says. There was more money and there was a follow-up, although this was not on national television.

The follow-up included radio and newsprint messages, hot lines, community grants for groups educating people at risk and brochures.

A follow-up was not strictly measurable in terms of the mass media. "It is not the way of initiating all behavioural changes."

Professor Penny does admit that the commercial was "too heavy" and that it may have made some AIDS victims feel like Grim Reapers themselves. This was never intended and was a pity, he says.

Professor Penny, who was appointed professor of clinical immunology at the University of NSW recently, said he had not expected the Grim Reaper to survive so long. It had been a success beyond expectation.

At the world summit of health ministers held in Britain earlier this year he said there had been a lot of interest in the advertisement and several countries asked for copies of it. Recent surveys in Australia had shown there was still support for its imagery from the public, although not from target groups such as homosexual men. Some local

health groups, which had nothing to do with AIDS, had also requested permission to use the advertisement as a model to fight other diseases.

/12223

HONG KONG

New Hepatitis A Cases Raise Fears of Epidemic
54400090 Hong Kong HONGKONG STANDARD in English 7 Apr 88 p 4

[Text] An epidemic of hepatitis A may be starting in Hongkong.

The warning was sounded yesterday by a Medical and Health Department spokesman after it was confirmed four new cases had been detected since last Thursday.

The total number of confirmed hepatitis A patients now stands at 665.

In all, 1,527 viral hepatitis cases have been reported including hepatitis B and unconfirmed ones since January 1.

Usually the Health Department would expect that many cases over a whole year, the spokesman said. Last year there were only 400 cases in the same period.

Of this year's cases, 81 have the more virulent strain of the virus, hepatitis B, and 781 are unidentified. Many of the unidentified cases would never be followed up, the spokesman said.

He said the Government only started classifying different sorts of hepatitis this year "because of the recent outbreak and because of press interest."

This is despite the fact that hepatitis A and hepatitis B are transmitted in different ways and therefore require different precautions for those suffering from the disease.

Hepatitis B is transmitted through blood and mucus in a way similar to AIDS whereas hepatitis A can be contracted through consuming contaminated food and water.

At present, 115 hepatitis patients are in hospital in Hongkong.

/9738

SOUTH KOREA

Domestic Firm Seeks To Export AIDS Drug *SK2804021588 Seoul THE KOREA TIMES in English* 28 Apr 88 p 3

[Text] A domestic pharmaceutical company is seeking ways to export AZT, the first drug officially approved for worldwide use against AIDS [Acquired Immune Deficiency Syndrome], developed by use of local technology for only the second time in the world.

The AZT (azidothymidine), an antiviral drug originally developed by Burroughs Wellcome of Britain for the treatment of cancer, is heralding relief for some 80,000 AIDS patients in the world for its certain effects on the deadly disease.

A research team of the Korean Chemical Research Institute, led by Dr. Kim Chong-ho, succeeded in developing some 20 steps of the synthetic process leading to the production of AZT in 1987, at the request of the Samchully Pharmaceutical Co.

Samchully succeeded in commercializing the originally-developed technology and completed preparation for mass production last March. The production license for AZT and its ingredient chemical substances was granted on April 14 by the Health-Social Affairs Ministry.

Kim Tong-ho, deputy chief of the development department of the company, said that it aims at exporting some \$10 million worth of AZT as well as pre-step materials, Thymidin and 2-Deoxy-D-Ribose, a year.

AZT is sold at \$15,000 per kilogram, but Samchully may provide it at a much lower price, \$8,500 per kilogram, to the world market as a result of its adoption of low cost methods, according to Kim.

He added that Samchully is the only company which is in possession of some 20 steps of the complicated synthetic process which may produce the finished AZT from 2-Deoxy-D-Ribose and Thymidin.

Burroughs Wellcome, which holds a process patent on AZT and its "protection for use," is monopolizing the supply of AZT, which it produces using Thymidin supplied by other companies, to world market.

The U.S. Food and Drug Administration gave its approval for sale of AZT last year, making it commercially available for the treatment of AIDS patients.

The AZT has proved to be effective in prolonging the life of AIDS victims by slowing or inhibiting the reproduction of the AIDS virus so that there may be some regeneration of the T-4 lymphocytes, the disease-fighting white blood cells that are usually decimated by AIDS.

For the export to the United States, Samchully is holding negotiations with Burroughs Wellcome which is said to have production capacity for AZT to allow treatment of some 20,000 patients.

In the meantime, Samchully has indicated its intention to supply the drug, free of charge, to the health authorities which are in charge of management of 2 AIDS patients and 17 virus carriers reported in the country.

Institute Produces Successful Anti-AIDS Drug *SK0305030488 Seoul YONHAP in English* 0255 GMT 3 May 88

[Text] Seoul, May 3 (YONHAP)—South Korea has successfully produced an anti-AIDS drug which can restrain development of the AIDS virus in patients, the Health and Social Affairs Ministry said Tuesday.

The Korea Research Institute of Chemical Technology and Samcholli Pharmaceutical Co. co-developed the anti-AIDS drug dubbed AZT (azidothymidine) and received the Ministry's approval Tuesday for its production and export, the Ministry said.

A Samcholli official said AZT cannot completely stamp out the virus which causes AIDS (acquired immune deficiency syndrome) but it can lengthen the life span of AIDS patients by restraining development of the virus in the body.

The drug was first developed by Burroughs Wellcome Co. of Britain and was originally used as an anti-cancer drug. It was approved by the U.S. Food and Drug Administration in March last year.

The Korean development team is considering exporting intermediates of the drug to European Countries, including Britain, and North America beginning next month, with an annual export goal of about 10 million U.S. dollars.

Domestic sales of the drug are not yet permitted as clinical examinations and tests in Korea are still under way, the official said.

The price of the anti-AIDS drug on world markets is 155 dollars per 100 milligrams but Korea's export price is expected to be half that amount because of domestic mass production.

VIETNAM

Ha Bac Insect Control

*BK1405144588 Hanoi Domestic Service in Vietnamese
1430 GMT 9 May 88*

[Summary] Along with combating drought, Ha Bac Province is protecting 5th-month spring rice against insects and diseases, especially brown planthoppers and rice blast which are ravaging more than 21,500 hectares of rice. The provincial branch of the Vegetation Protection Department has directly supplied various establishments with more than 46,000 metric tons of insecticides, 28 metric tons of gasoline, 140 metric tons of diesel oil, and 1,020 insecticide sprayers for the control of insects and diseases.

BAHAMAS

Head of National AIDS Committee Gives Status Report

54400091 Nassau *THE TRIBUNE in English*
8 Apr 88 pp 1, 12

[Article by Anthony Forbes: "151 New Cases of AIDS for 1988' Reports Doctor"]

[Excerpts] One hundred and fifty-one new cases of AIDS have been reported in the Bahamas for the first three months of 1988, almost half the total recorded for last year. There were 354 reported cases last year.

Dr Perry Gomez said today that the Bahamas' level of AIDS infection—0.8 per cent of the population—compares favourably with the 0.04 per cent in North America and 0.6 per cent in Jamaica, but does not approach the 12 to 15 per cent level in Haiti and Central Africa.

Noting that 50 per cent of the AIDS cases among the local population are among drug addicts, Dr Gomez said that it is going to be difficult to succeed in AIDS prevention unless there is success in the fight against drugs.

Dr Gomez gave an address on AIDS today at the two-day drug symposium, sponsored by the Drug Action Service, at the Wyndham Ambassador Beach Hotel.

The symposium—People Advancing Caribbean Community Transformation (PACCT) '88,—is under the theme, "Training for Caribbean Action."

"As the rate of AIDS (Acquired Immune Deficiency Syndrome) increases around the world, so has it done here in the Bahamas," said Dr Gomez, Deputy Chairman of the National AIDS Committee and Consultant in the Infectious Diseases Department of the Princess Margaret Hospital.

Dr Gomez, who began his address with a slide presentation, told his audience that there were 36 AIDS cases in 1985, 50 in 1986 and 89 in 1987. He said that there were 20 AIDS carriers in 1985, followed by 85 in 1986 and 249 in 1987.

"It is happening the same way around the world, that AIDS cases are doubling," Dr Gomez said.

He said that the number of AIDS cases is expected to double over the next five years from the pool of people who are already infected with the disease.

"In 1988 in the Bahamas we have continued to see the number of AIDS infections rise," he said. "We have seen today, at the end of March, another 151 infections in the Bahamas."

"That compares with the total for 1987—354. So the first three months of this year is almost half of last year," Dr Gomez said.

"In the Bahamas, the pattern of transmission has been heterosexual from the onset," Dr Gomez said.

"So the latest data we have for our country shows, data which come from our Blood Bank, that the prevalence in the normal view of things is 0.8 per cent of donors who have turned out for HIV infection," he said.

He said that in the Bahamas 20 per cent of the cases is among newborn infants, which confirms that AIDS in this country is a heterosexual disease.

"The ratio of men to women infected is 1.8 to 1, compared to North American where you might have as high as 30 men to one female," Dr Gomez said.

"So that the implications of heterosexual transmission of AIDS in this country or any country has to do with the spread to women and then the spread from women to children with the subsequent implications for health care," he said.

He said that the National Advisory Committee on AIDS is continuing its public education efforts on radio and television and is in the process of planning strategies for the remainder of this year.

"So we are on the way in fighting this terrible killer," he said.

/12223

BOLIVIA

Health Minister Reports Increase in AIDS Patients

54002024a Santa Cruz *EL MUNDO in Spanish*
25 Mar 88 p 10

[Text] La Paz, 24 Mar (EL MUNDO)—AIDS continues to be on the rise in Bolivia, where the reported number of patients to date now totals 16, of which 7 have been determined as positive cases of Acquired Immune Deficiency Syndrome; nine of these are persons diagnosed as afflicted by the disease whose laboratory specimens will be sent to Brazil for respective confirmations. This is according to information released today by Public Health Minister Carlos Perez Guzman.

This is the result posted as the first quarter of this year draws to an end, for the nationwide anti-AIDS program being conducted by the aforementioned ministry.

During this first quarter, the INLASA [National Laboratories Institute] has processed 300 serologic specimens of high-risk groups in Potosi, La Paz and Tarija.

The total number of registered AIDS cases throughout the country between 1985 and the first quarter of 1988 shows the following distribution, according to the official report: In Cochabamba, 1 case, male, 54 years of age, possibly contracted the disease in Brazil. The victim, deceased, was characterized as homosexual.

In Santa Cruz, 2 cases, both male, 41 and 42 years of age, the first, considered a homosexual, possibly having contracted the disease in Brazil, and the second, a heterosexual, probably having contracted it in Canada.

In La Paz, 3 cases: The first, male, 45, probably having contracted the disease in the United States, deceased.

The second of the above cases, 24, having contracted the disease in La Paz, was sent to Brazil for treatment.

The third, male, 46, heterosexual, is currently receiving treatment in La Paz's Hospital de Clinicas.

Infected Persons

The report adds that the number of persons infected with the HIV during the same period is as follows: In La Paz, 4 reported cases, the point of contact probably having been La Paz; in Tarija, 1 person from a risk group (female prostitute); and in Potosi, 4 cases (2 homosexuals, 2 female prostitutes).

Campaign

It was announced that the entities responsible for monitoring and campaigning against the spread of this disease, which affects humanity as a whole, will step up their efforts, intensifying research within groups at risk and diligently monitoring blood banks.

Education through audiovisual means and printed matter will also be enhanced, providing greater detail; and condoms will be distributed free of charge to groups at risk.

A project will be submitted to USAID requiring funding in the amount of \$500 million over the period 1988-1990, for the operation of INLASA laboratories concerned with analyzing the results of Western-Blott and indirect immunodeficiency tests, Cenetrop-Santa Cruz laboratories, and the Public Health laboratories in Sucre, Cochabamba, Tarija, Beni and Potosi.

9238

Director Reports on Malaria, Dengue 54002024b La Paz PRESENCIA in Spanish 17 Mar 88 p 7

[Excerpts] The national director of epidemiology, Jorge Mariscal, stated yesterday that there are some 20,000 cases of malaria in Bolivia. The departments most affected are those of the Amazon zone: Tarija, Chuquisaca and Cochabamba.

Because of this, a number of strategies are being implemented in countries of the Southern cone, aimed at reducing the levels of infestation of various types of mosquitoes that cause epidemics in Brazil, Bolivia, Argentina and Paraguay. Border controls will be set up to prevent greater outbreaks.

He also stated that the level of infestation of the *Aedes aegypti* mosquito has diminished to some 6 percent, as compared to that of 34.6 percent as of the end of last year.

This has resulted in a notable decrease in cases of dengue. The director said that five districts of Santa Cruz are being monitored.

One sizable team is working in Camiri, and four in Tarija.

Fumigation operations are of two types: spatial and perifocal.

He stated that there are no cases of yellow fever anywhere whatever in the country.

9238

CAYMAN ISLANDS

Local Statistics for Various Diseases Reported 54400092 Grand Cayman CAYMANIAN COMPASS in English 5 Apr 88 pp 1, 2

[Article by Carol Winker: "Local Statistics Show a Healthy Cayman—So Far"]

[Text] If Cayman residents needed any additional evidence concerning the quality of life enjoyed in these Islands, World Health Organisation statistics provide it.

According to material distributed for international observance of World Health Day (Thursday), average life expectancy ranges from over 70 in some countries to barely 50 in others. In Cayman, life expectancy has been calculated to be 74.5 years.

In most developing countries, the number of infants who die during their first year ranges from almost 100 to over 200 of every thousand.

Industrialised countries have brought this infant mortality rate down to between 10 to 20 and even less. In Cayman, the infant mortality rate last year was 2.8 per thousand:

358 babies were born in 1987; there was one death of a child under one year.

Women in most poor countries have a 200 times greater risk of dying during pregnancy and delivery than women in a rich country. In Cayman, there has been one maternal death in the past ten years.

Tuberculosis claims up to ten million victims a year; Cayman had zero cases last year, one the year before and a high of four in 1985.

Polio, the leading cause of disablement in developing countries, afflicts 275,000 people around the world annually; statistics dating to 1981 show no cases here.

Every year 50 million children develop whooping cough and 600,000 of them die. In Cayman no whooping cough has been reported since 1984, with four cases that year.

According to WHO, the industrialised countries have achieved a remarkable degree of control over communicable diseases in recent decades and are now grappling mainly with the so-called "diseases of affluence"—heart disease, cancer, alcoholism and drug abuse.

In view of all that has been reported about the millions of people who lack basic housing, nutrition, water and sanitation, it seems almost incredible that, if a child survives the first five years of life, then the most common causes of death worldwide are cardiovascular (heart and blood) diseases, cancer and accidents. These are all causes of illness and death which the individual person has a great opportunity—and responsibility—to control.

Individual lifestyle decisions—including exercise, diet, tobacco, alcohol and drug consumption—are now being recognised as critical to a person's health.

In Cayman, there are no readily available statistics on alcohol use or its effects on health. The 1987 Police Report shows 121 reported cases of consuming ganja; 102 cases of consuming cocaine; 62 cases of refusing to provide a urine sample for drug testing; and 207 cases of suspicion of consuming a controlled drug.

Sexually transmitted diseases included 70 cases of syphilis and 162 gonococcal infections last year.

Seven persons have tested positive to the AIDS antibody test, in addition to one case of AIDS, apart from the recent two AIDS-related deaths.

There are 500 known diabetics in Cayman and probably an equal number of cases not identified. There are 1,000 cases of hypertension, with an estimated 600 other persons unaware of their condition and another 400 aware of it but not getting treatment.

Both these conditions can lead to more serious health problems if the person who has them does not take steps to control them.

During Health Week (4-10 April) screening programmes for the detection of high blood pressure and diabetes are offered free of charge at all district health centres, the Public Health Section of George Town Hospital and Faith Hospital, Cayman Brac. Hours are 9:00 am to 4:00 pm today through Friday and 9:00 am to noon on Saturday.

Informative articles, emphasising prevention rather than cure, will be carried in the CAYMANIAN COMPASS each day. Radio Cayman will broadcast health-related discussions today, tomorrow and Thursday, with a phone-in session on Sunday.

Cayman's Health Week activities have been coordinated by Medical Officer of Health, Dr. Kiran Kumar.

/12223

COSTA RICA

Malaria Situation Concerns Medical Authorities
54002022 San Jose LA NACION in Spanish
21 Mar 88 p 12A

[Text] There have been three new cases of malaria each day in Costa Rica, according to spokesmen of the Ministry of Health.

They stated that this means that the teams in charge of controlling the advance of the disease are very busy treating the sick and impeding the growth of the mosquito that transmits the disease.

According to the data supplied by the Department Against Malaria, a total of 248 cases have been reported so far. The largest percentage has occurred in Limon Province, especially the cantons of Talamanca, Matina, and Siquirres.

The director of that department, Dr Jose Luis Garces, revealed that the workers who fight malaria work quietly but effectively, frequently at risk to their lives.

Experts on this disease met in Costa Rica last week. They feel that there has been deterioration in this area. They feel that the disease persists or has intensified in those areas where it had already been recorded and has reappeared in areas which were recovering.

There has been concern because malaria persists in zones where living conditions and housing are precarious. It has a negative impact on agricultural and livestock production.

They said that migrations of displaced refugees and unemployed workers looking for jobs in new productive activities help spread the disease or start new areas of transmission.

7717

GUYANA

Health Officials Report 10 of 18 AIDS Victims Have Died

54400093 Georgetown *BARBADOS ADVOCATE* in English 14 Apr 88 p 11

[Article: "10 Die of AIDS in Guyana"]

[Text] Georgetown, Guyana, Wednesday, (CANA)—Guyana health authorities have confirmed 10 AIDS deaths so far out of 18 cases of the killer disease positively identified in the country.

However, government epidemiologist Dr Edgar London, quoted by the state-owned *CHRONICLE* newspaper, said this figure does not represent a true indicator of the number of persons infected.

According to the *CHRONICLE*, London contends that to arrive at a realistic picture of the situation, it could be safe to multiply the figure of 18 by 100.

This would mean that there could be about 1,800 AIDS-infected persons in Guyana. With Guyana's population estimated at about 800,000 people, one in every 444 persons could be infected at the moment.

Meanwhile, the *CHRONICLE* also reported that two consultants from overseas Dr. Astrid Richardson, health educator of the World Health Organisations' global programme on AIDS based in Geneva and Dr. James Hospedales, epidemiologist attached to the Caribbean Epidemiology Centre in Port of Spain—are now in Guyana assisting with the formulating and the developing of a national strategy to control the spread of AIDS.

The consultants reportedly are advocating that while there should be no compulsory testing of the population, persons—especially those in the high risk groups, namely homosexuals and intravenous drug users—should be encouraged to step forward voluntarily and be tested.

The overseas consultants who have already visited a number of other Caribbean countries are working closely with Guyana's National AIDS Committee headed by chief medical officer, Dr. Enid Denbow in developing programmes for the prevention and control of the spread of AIDS in Guyana.

Meanwhile, the ministry of health has initiated steps to equip itself with up to date laboratory facilities for testing for AIDS. The European Economic Community (EEC) is expected to fund the project.

/12223

Defense Force Helps With 'Vicious' Malaria Outbreak

54400089 Georgetown *GUYANA CHRONICLE* in English 22 Mar 88 p 5

[Article: "GDF 'Helps Out' in Baramita"]

[Text] Baramita is a small predominantly Carib community of some 122 Guyanese, nestling in a beautiful mountain valley eighty miles from Matthews Ridge in Region One Barima-Waini.

During the past 3 months the residents of this village and those of the surrounding localities of Aranka, Warapa and Log Hill, have been suffering from the particular vicious form of malaria which has recently struck so many interior communities.

Recently a routine GDF patrol passing through the area, recognised the plight of the villagers and the problems which the lone Ministry of Health representative faced in attempting to treat them for the disease.

Immediately a team of GDF medical personnel, including a microscopist trained by the Ministry of Health, was assembled, and airlifted, with medical and food supplies to Baramita.

Blood tests done on 282 persons revealed that 52 of them had the malaria parasite in their blood streams. With the assistance of the MEP representative in the area, these were immediately treated, and the others given the necessary preventive medication.

In responding to the situation in Baramita the Guyana Defence Force is simply continuing its faithful tradition of service to the far-flung interior locations of Guyana.

/12223

JAMAICA

EEC To Help Caribbean Nations With AIDS Control

54400088 Georgetown *GUYANA CHRONICLE* in English 23 Mar 88 p 6

[Article: "Caribbean To Get EEC Help with AIDS Control"]

[Text] Kingston, Jamaica—(IPS)—Caribbean Community (Caricom) countries are to get assistance from the European Economic Community (EEC) to finance and enhance their national programmes to control the spread of Acquired Immune Deficiency Syndrome (A.I.D.S.).

The EEC assistance will be aimed at strengthening surveillance, defining intervention strategy for high-risk groups, employ a senior epidemiologist to work with the health authorities in AIDS-related research, staff-training and formulation of programmes for detection, prevention, control and care of the disease and infected persons.

Finance will be provided for the purchase of equipment and test kits, under the EEC AIDS Control Programme for the African Caribbean and Pacific (ACP) States, the grouping of former and present colonies linked by the Lome Convention.

Jamaica will be provided with an epidemiologist, Grenada will get help to rehabilitate its blood transfusion services, Guyana to upgrade its blood bank. Trinidad and Tobago, The Bahamas and Barbados will also receive assistance.

/12223

MEXICO

Jalisco AIDS Cases

54002021d Mexico City EXCELSIOR (STATES section) in Spanish 1 Mar 88 p 1

[Article by Eduardo Chimely Ch.]

[Excerpts] Guadalajara, Jal., 29 Feb—Miguel Castellanos Puga, head of the Health Department in this state, reported today that vigilance over blood banks will increase because the AIDS virus has spread through transfusions. Some 139 cases have been detected in the state; 75 percent of the victims have already died.

The official said that the deaths of 75 percent of the 139 AIDS cases recorded in Jalisco represent a higher mortality rate than the national rate of 35 percent.

7717

Cuernavaca, Coahuila AIDS Cases

54002021c Mexico City EXCELSIOR (STATES section) in Spanish 24 Feb 88 pp 1, 3

[Excerpt] Two new AIDS cases were detected in Cuernavaca, Morelos, according to the state assistant secretary of health, Jose Leon Lopez Bucio, today. He added that they have detected 24 cases so far in the state. According to official data, 41 people in Coahuila are infected with AIDS. This was indicated by the president of the Executive Council of the Red Cross delegation, Jose Arizpe.

According to Lopez Bucio, 20 blood tests were given to 20 volunteers. Two were found to have advanced AIDS and were immediately sent to Mexico City for care.

The official pointed out that despite strict control over the blood banks, AIDS cases are still detected in public and private hospitals. This situation still concerns health officials. Therefore, "it is appropriate to undertake a campaign to prevent the disease."

He pointed out that the two people infected, and two others being analyzed because of their symptoms, lived in the United States. "During the past 6 months that they lived here, they may have infected more people."

The state health official explained that carriers of the virus frequently come to Morelos but few of them are natives.

In Torreon, Coahuila, Jose Arizpe indicated that there will be strict health control because, from 1981 until now, 783 AIDS cases have been reported in the country and 41 correspond to this state. Of these, 31 have been treated in the Lagunera District.

7717

First Mazatlan AIDS Case

54002021e Mexico City EXCELSIOR (STATES section) in Spanish 15 Mar 88 p 1

[Excerpt] Mazatlan, Sin., 14 Mar—Enrique Perez, health sector delegate, indicated today that the first AIDS case was detected here. He said that the patient, who is in serious condition, contracted the disease in the United States.

The doctor explained that the health sector has a list of people "suspected" of having AIDS, but this is the only official case. The doctors are giving appropriate treatment. However, death is expected in a few days since the disease is very advanced.

7717

25,000 Seen Infected With AIDS By 1991

54002021a Mexico City EXCELSIOR (STATES section) in Spanish 28 Feb 88 pp 1, 3

[Article by Eduardo Chimely Ch.]

[Excerpt] Guadalajara, Jal., 27 Feb—If AIDS continues to spread in the country, there will be more than 25,000 victims detected by 1991. More seriously, almost 2 million people could potentially be infected.

The director of epidemiology of the Secretariat of Health, Jaime Sepulveda Amor, announced this here today. He and some 200 researchers and scientists from the United States, Mexico, Central America, and South America were participating in the First Pan-American Congress on AIDS.

The health official acknowledged that it is still impossible to speak of important achievements in the campaign against AIDS. In Mexico, he said, "there are now 1,126 confirmed cases. About 80 percent of the victims die within 3 years after contracting the virus and 20 percent die in a maximum of 5 years."

7717

AIDS Costs, Other Statistics Cited

54002021b Mexico City *EXCELSIOR* in Spanish
25 Feb 88 pp 4-A, 35-A

[Article by Rafael Cienfuegos]

[Excerpts] The number of AIDS cases that the health sector will have to take care of in the next 4 years will increase from slightly more than 1,000, in December 1987, to about 25,000. Meanwhile, the number of Mexicans infected with the virus will reach more than 2 million.

SSA [Secretariat of Health and Assistance] estimates show that this disease has become a high priority public health problem that must be addressed. Its economic cost is very high because 15 million pesos, at last year's prices, are spent annually on each victim.

Jaime Sepulveda Amor, general director of epidemiology of the SSA, stated that although the increase in the number of AIDS cases in our country has surpassed preliminary estimates, the strategies the health sector has undertaken to fight it have yielded optimum results. Transmission of the disease by blood transfusion has been practically eliminated and the sexual attitudes of groups considered high risk have changed.

The official's estimates indicate that, for every 1,000 males 25 to 40 years old, 2 or 3 are now infected. There are between 40,000 and 80,000 carriers of the virus in Mexico who do not have AIDS.

He revealed that the majority of those infected by that disease are in the Federal District—45 percent—followed by the city of Guadalajara and the states that have a common boundary with the United States.

The Mexican Associations of Epidemiology, Immunology, and Internal Medicine held the First Congress on the Epidemiology of AIDS at the end of 1987. They indicated that, as of 15 November, 886 cases had been recorded. At the end of 1987, this figure was slightly more than 1,000. The number seems to increase 10 percent a month.

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PERU

IPSS Opens AIDS Awareness Drive

70 Fatalities Reported

54002020b Lima *EL COMERCIO* in Spanish
28 Feb 88 p A 10

[Excerpt] The Guillermo Almenara Irigoyen Hospital initiated a campaign to prevent AIDS yesterday. The objective is to alert people about the basic aspects of this disease which has caused 70 deaths in Peru so far.

From 8 am to 4 pm, more than 5,000 illustrated prevention pamphlets were distributed free to the people who came to the tent that was set up in front of the hospital.

The director of that hospital, Dr Mario Chiappe, revealed that this is part of a campaign in which information will be given to the people who come to the hospital for any type of medical care.

Also he proposed "urgent" action to eliminate AIDS in all the jails of the republic. "A study to detect this disease is indispensable, given the sexual promiscuity in the jails."

Diagnostic Laboratory Network Discussed

54002020b Lima *EL COMERCIO* in Spanish
20 Mar 88 p A 10

[Text] Everything related to the characteristics that a future network of Laboratories to Diagnose AIDS should have will be analyzed in a workshop organized by the National Multisectorial Program for the Prevention and Control of AIDS.

The meeting that will be held tomorrow and Tuesday has the support of WHO and PAHO.

It will be held in the PAHO auditorium located at Los Cedros 269, San Isidro.

Doctors and laboratory workers of the departmental health units of Lima and the Peruvian Social Security Institute will participate.

In addition to adapting laboratories, they will discuss the feasibility of "Elisa" tests—indicators of AIDS—and the demand for blood transfusions.

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200 Measles Fatalities in Huari Termed Preventable
54002020a Lima *EL COMERCIO* in Spanish
12 Mar 88 p A 12

[Excerpts] Approximately 200 deaths from the measles epidemic in Huari Province and Callejon de Conchucos, Ancash, could have been prevented if there had been effective endemic control by the Ministry of Health.

Dr. Ciro Maguina Vargas, a specialist in epidemiology and financial secretary of the Association of Health Sector Doctors, stated this. He said that it was known that the ecological conditions in those zones are ripe for periodic outbreaks of various diseases and increases in various insect populations.

He also indicated that there is inadequate control of the personnel working in the distant provinces of the country. Also a program to maintain adequate refrigeration networks at the medical posts so the vaccines do not deteriorate is not being implemented.

He also revealed that, during his stay in Callejon de Conchucos, there were outbreaks of whooping cough, measles, Peruvian warts, and uta in several provinces in Ancash, most of which are hard to reach. These diseases develop in semitropical climates with suitable ecological conditions.

He also remarked that there is no integral vaccination program that reaches the most remote parts of the country. "VAN" vaccination campaigns are only carried out in provincial capitals.

He further stated that several babies up to 4 months old died from measles because the Ministry of Health, unaware of the pathology of the disease, ordered that the measles vaccine only be given to children over 8 months. He concluded: "This situation was recently corrected."

New Cases of Leprosy, Uta, in Country

Maguina stated that cases of uta have appeared in Huanuco. According to the latest statistics, there were 600 cases in 3 months. He said that he knew of children in downtown Huanuco with that painful disease.

He also indicated that some leprosy cases appeared in Yurimaguas for the first time. He stated: "We are second in Latin America, after Brazil, in leprosy cases."

He explained that there is a program to control leprosy. However, it is so minimized that it is not given proper importance.

AFGHANISTAN

Health Ministry Conducts Anti-Malaria Campaign

54004712 Kabul KABUL NEW TIMES in English
8 Mar 88 p 4

[Article by Zakia]

[Text] The anti-malaria department of the public health ministry detected and cured over 364,000 malaria cases during the last seven months. The department also supplied medicines worth over 6 million Afs to malaria patients in the same period.

A total of 66,100 kg of malathion and DDT valued at 5 million Afs was sprayed by the department throughout the country in this period. During the current year the department has treated 8,000 Leishmania cases.

Dr Abdul Qadeer Marouf deputy president of the anti-malaria department in an interview with a KNT reporter said: "We have eight zones and 33 units operations throughout the country. Our department has 150 well equipped laboratories and 467 of them are located in Kabul city.

"Similarly we have four centres against Leishmania in Kabul and four in Kandahar, Parwan, Balkh and Herat Provinces.

"In order to train qualified cadres, we are sending our personnel abroad for further specialization. Also we conduct courses and seminars in Kabul as well. Twenty-eight persons have completed these course and are carrying successfully their duties in various sections." [as published]

Dr Qadeer added that the incidence of malaria is prevalent throughout the country with more cases being in the north and northeast provinces.

The reason is lack of thorough implementation of anti-malaria campaign and the damp and humid climate in those areas. This has caused the preventive approach there to be more costly than curative.

The anti-malaria has 809 qualified personnel working in various sections of the department, concluded Dr Qadeer.

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BANGLADESH

Health Minister Affirms No AIDS Cases in Nation

54500127 Dhaka THE NEW NATION in English
12 Apr 88 p 3

[Article: "No AIDS Case Detected: Health Minister"]

[Text] The Deputy Prime Minister in charge of Ministries of Home Affairs Health and Family Planning Professor M.A. Matin said that the Acquired Immune Deficiency Syndrome (AIDS) had not yet been detected in Bangladesh. He stressed for taking forward and action plan in advance in this regard, reports BSS.

He was presiding over the first meeting of national committee on AIDS in Dhaka on Saturday where Health Secretary Manzoor-ul-Karim also spoke.

Prof Matin asked the members of the committee to be vigilant and take necessary steps if there was any case of AIDS detected. He directed the members for undertaking a short-term action plan including launching programmes for public-awareness, augmenting laboratory facilities, arranging training of the relevant personnel, campaigning, publishing clinical booklets and taking health education programmes at the earliest.

The DPM underscored the need for evolving scientifically acceptable action plans using available knowledge and knowhow about the disease. Government would consider to undertake appropriate social and legal steps if needed the Health Minister added.

The National Committee on AIDS was also reconstituted in the meeting with professor SGM Chowdhury taking representatives from Ministries of Health and Family Planning Home Affairs, Social Welfare and the social workers.

/12223

Writer Gives Yearly Statistics on Rabies Deaths

54500128 Dhaka THE BANGLADESH OBSERVER in English 17 Mar 88 p 5

[Article: "'Dangerous' Eucalyptus Plus Waste—A Boon?"]

[Text] Rabies is the number one zoonotic disease in Bangladesh. Zoonotic diseases are the diseases which are transmitted between veterate animals and man and vice versa.

Rabies occurs through out the year in all parts of the country. It is estimated from the scattered hospital records that more than two thousand persons die of rabies every year and more than 50,000 persons bitten by rabid animals undergo anti-rabies treatment annually.

This figure, however, does not include the total number of persons exposed to the risk of developing human rabies because of maximum unreported cases from rural areas.

The situation of rabies in animals is worse. According to a report published recently in the press about two thousand and five hundred cattle and nine hundred goats died due to rabies annually only in Madaripur and Sariatpur districts and the estimated cost is approximately 90 lakh Taka and the report seeks to take necessary steps for controlling this malady.

/12223

Cattle Disease Epidemics Pose Problem for Rural Economy

54500129 Dhaka THE BANGLADESH OBSERVER in English 13 Mar 88 p 5

[Article: "Cattle Disease"]

[Editorial] A report from Satkhira says that the outbreak of cattle disease in epidemic form has already taken a toll of 250 heads of cattle and is spreading fast. The affected upazila is Shyamnagar and Tala. As is the nature of any epidemic affecting cattle, the killing disease is spilling over to neighbouring upazilas. One of the reasons for the epidemic to take on such a dimension is the reported failure so far by the local veterinary hospital doctors to diagnose it and to do the needful to contain it.

This clearly suggests that the preventive or curative part of the medical approach to the problem is very inadequately addressed. The need is obviously for more knowledgeable doctors. Veterinary training and expertise is among the most efficiently developed techniques generally in developed countries and in some developing countries. We seem to be still deficient in this regard and the price paid for it is pretty heavy. As reported, already in the affected upazilas farming has been seriously affected by the decimation on an increasing scale of draft animals. It is worth noting that cattle epidemics of this kind frequently break out in the countryside causing a large-scale destruction of livestock resources of the country. This is a problem as important as any other problem with its effects on the rural economy, immediately, and on the national economy in the long-run.

The Agricultural department has to take immediate note of it and do everything necessary to arrest the reported outbreak as well as spot the gaps in the system of maintenance and preservation of cattle resources.

As happens always in a crisis like this, it is reported that the diseased animals are now crowding the markets and being sold at a nominal price. The sick animals are also being slaughtered and the beef market has started booming. This is not only cruel but also a threat to public health. This also shows that there is nothing at the veterinary or local administration level to stop such

dangerous practices. May we hope the problem will be given the attention it deserves considering its impact on farming activity, public health and the economy.

/12223

Unidentified Disease Kills Millions of Fish

54500126 Dhaka THE BANGLADESH OBSERVER in English 21 Mar 88 p 1

[Article: "Fish Worth Crores of Taka Dying"]

[Text] Scientists are still unable to confirm the cause of the disease which broke out last month and has spread in an epidemic form over the weeks in the central and southern parts of the country killing millions of fish worth crores of taka, reports BSS.

No preventive or curative measures has yet been developed against this disease due to lack of knowledge both here and abroad.

Mr. Ahsanullah, Director, Department of Fisheries, told BSS today that they had nothing to do but to depend on natural cure of the disease.

He said that departmental instructions had, however, been given for taking measures to check any outbreak of the disease, ulcerative syndrome, at fish farms and hatcheries all over the country.

He also suggested use of five to 20 kilograms of quick lime per acre of fish ponds or any closed water depending on the pH value i.e. acidity or alkalinity of the water.

Fish mortality has reached critical stages in Dhaleswari River in Narayanganj, Dakatia river in Chandpur both in the central region, and many rivers around the estuarian Bhola district. Shoals of dead fish were found floating in canals and ponds in Chandpur.

Other Countries

Ulcerative syndrome repeatedly first broke out in an epidemic form in Australia in 1972. It then spread to Papua New Guinea, Indonesia, Malaysia and Thailand in 1983 and to Burma in 1984.

Scientists working at the headquarters of the Network of Aqua Culture Centres in Asia (NACA) at Bangkok found that a virus called "rabdo virus" might be responsible for causing the plague but it is yet to be confirmed. Environmentalists believe certain pesticides from agricultural fields are causing ulceration.

Ulcerative syndrome causes deep ulceration in the fins, jaws and faces of the fish, resulting in death in most cases.

The disease first breaks out in open waters like rivers and canals normally at the advent of rainy season. Later the infection spreads among the fishes of closed waters like ponds and lakes.

The fishes like kai, magur, 'sing and shoil' which takes oxygen directly from the air are more prone to this syndrome.

Mohammad Ahsanullah said the Fisheries Department was aware of the disease before its outbreak in Bangladesh.

He said that apprehending its outbreak in Bangladesh any time, they sent two scientists training at Naca in Bangkok. One of them is working with this disease at the Fisheries Research Institute at Mymensingh and the other at the Fisheries Training Institute at Rajbari, Faridpur.

He said it was advisable to avoid taking a fish stricken with this disease. Eating such a fish may cause anything from simple tummy-ache to acute gastric complications.

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EGYPT

Egypt Prepares Strategies To Face Locusts
54004607 Cairo AL-AKHBAR in Arabic 28 Mar 88 p 3

[Article by Raji al-Wardani]

[Text] Will Egypt, God forbid, be exposed to a locust invasion? To be specific, will the death swarms head for our agricultural land to turn millions of green feddans into desert in a matter of minutes? From where are locusts likely to come to us, and can we fight them? Will our southeastern desert turn from an area into which locusts spread to an area where locusts propagate? And will we consequently be threatened to permanently coexist with the presence of this greedy insect? Will the climatic conditions that influence locust movements play the same role they played last year when they changed the direction of the locust swarms to West Africa to rescue us from an imminent danger? Will the regional wars and conflicts continue to be a main reason for the propagation of this insect, to the point where it poses a threat to mankind's sustenance?

These and many more questions have been reiterated in the past two days since the FAO warned that locusts are on the way, that their invasion will be devastating, and that a new wave of locusts has invaded five North African countries—Algeria, Libya, Morocco, Tunisia and Mauritania—and has severely damaged their crops, with the damage in Morocco devastating 200,000 hectares planted at the beginning of March 1988. Next month, April, is the time when young locusts turn into mature insects which join numerous swarms to begin their migration and invasion.

Whereas our southeastern desert used to be a mere transit area for locust migrations, it has been noticed in recent years that parts of this desert have become propagation areas, and herein lies the danger.

Current Situation

AL-AKHBAR went to the Ministry of Agriculture's experts and officials. At the Locust-Control Affairs Directorate, we interviewed Joseph Tawfiq 'Awad, the directorate's deputy director and a FAO adviser on locust affairs, who had just returned from a tour of the northwest African countries of Tunisia, Algeria, and Morocco. I asked the adviser if the tour was connected with the warning made by FAO.

[Joseph 'Awad] Yes, the tour was intended to check the locust situation, the preparations made by these countries, and the control procedures adopted by these countries, considering that this concerns all the countries threatened with locust invasion, especially Egypt and the Sudan, in the coming period. The locusts have begun to form dense swarms that are moving in a northeastern direction after having spent their winter propagation period in a vast zone covering parts of Northwest Africa, especially Southern Algeria, Southwestern Morocco, Mauritania, and the Western Sahara Republic which has no government—the Polisario area. Because of the absence of control activities in this territory, locusts have proliferated in large areas of cultivable lands and grazing lands where livestock has perished due to the lack of pasture.

[Question] How is it that the locust is such a dangerous insect?

g insect that is not specialized in eating a certain crop. Hence its danger. It inevitably devours garden leaves, palm fronds, or any plant it encounters.

Morocco is Fighting

[Question] What about the FAO report?

[Answer] The latest report from FAO, received on 12 March, indicates that the situation in Morocco, Mauritania, and the Sahara continues to be serious, that more than 245,000 hectares have been treated recently, and that locusts continue to be present in large parts of this area.

In Morocco, the Ministry of Interior has taken charge of the operations to control locusts on special instructions issued by King Hassan because of the extreme danger of locusts.

Three Directions

[Question] Is there an immediate danger posing a threat to Egypt?

[Answer] The problem is that the locust swarms being currently formed have actually begun their migration to the areas of their spring and summer propagation, moving in a northeastern direction. This means that they will pose a direct threat to Libya, Egypt, and the Sudan in the coming months, beginning in mid-April. Locusts may also invade us from the direction of the Red Sea coast and the Sinai, across which lie Saudi Arabia and Jordan. Moreover, they may invade across our southern borders with the Sudan. This means that the invasion is expected from three directions. We cannot, of course, deploy our control committees in all three directions simultaneously.

[Question] And the solution?

[Answer] Locust control is founded basically on predictions and possibilities. The control committees are deployed on the basis of a followup of the international reports on the areas where locusts are present, on movement and direction of the swarms, and on the climatic factors that influence swarm movement, such as winds, rains, and atmospheric pressure. This followup is intended to learn at the right time the direction from which an immediate locust threat is coming so that we may concentrate our committees in this direction. Currently, the committees are deployed on the southeastern borders to combat locusts coming from West Sudan. At the same time, observation committees are stationed on Libya's western borders for fear that any swarms may invade us from this direction.

The Desert Protects Us

Each of the locust swarms that reach our lands covers an area of 50-200 square kilometers. How can we fail to feel or see them when they fully conceal the sky?

Samir Nasim Jirjis, the head of the Locust Affairs and Agricultural Aviation Directorate, says: "Locusts lay their eggs at mountain foothills, in deserts or in unpopulated areas where rains fall. This allows locusts to multiply undetected until they appear suddenly while travelling hundreds of miles, carried by the winds. If the climatic conditions are convenient, such as the presence of atmospheric depressions over Egypt, then why shouldn't the locusts be attracted to Egypt? "We have founded the Egyptian locust-control strategy on fighting locust propagation and locust swarms on the Egyptian borders and in the heart of the desert before they reach cultivable parts of the Nile Valley so that the swarms may not come close to the Nile Valley. "At the end of the past summer, we expected locusts to come from the Sudan. This caused us concern and we mobilized all the defense lines along the borders in the heart of the desert. Fortunately, the locust swarms headed toward West Africa. At the beginning of this month, we encountered seven swarms coming from the Sudan, each covering an area of 50 square kilometers. We in Egypt proceed to the remotest areas to fight locusts because it is most important to do so."

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SUDAN

Government Attempts To Treat Continuing Meningitis Epidemic

Serum Shortages Reported

54004606 Khartoum AL-SIYASAH in Arabic
11 Mar 88 p 1

[Article by 'Adil Karrar]

[Text] Inoculation of citizens against the meningitis epidemic, which began after thousands of cases hit the national capital and various regions, stopped due to the repletion of the serum supply at specialized medical establishments and units. But large amounts of the serum spread into the black market via bribed and corrupt officials, to be sold to citizens for two Sudanese pounds per unit of serum. AL-SIYASAH received a lot of citizen complaints about the serum spreading into residential neighborhoods, where a number of medical workers inoculate the citizens with syringes, taking advantage of the false rumors that multiple usage of the inoculation "gun" would expose the inoculated persons to AIDS, despite the complete denial of such by the special authorities at the ministry of health.

AL-SIYASAH's investigations indicate that Dr 'Ali Hasan Taj-al-Din, member of the President's Council, reviewed the dangerous situation resulting from the depletion of the supplies of serum during his meeting yesterday with Dr Bakri Hamad Hasan, director of medical services in the national capital.

AL-SIYASAH learned, that, after this meeting, Dr 'Ali Hasan Taj-al-Din contacted the Egyptian ambassador Mr Taqi-al-Din al-Sharbini, who assured him that his government had approved the Sudan's request that Egypt assist by contributing meningitis serum to solve the crisis. The serum was expected to have arrived by yesterday.

Dr Taj-al-Din immediately contacted French professor Marion of the Pasteur Institute, who agreed to send one billion units of meningitis serum, which will arrive in Khartoum by next Tuesday.

Tomorrow, on Saturday, another shipment of 300,000 meningitis serum units will arrive from another destination on Swiss Air Flight 596. A responsible source in the medical corps told AL-SIYASAH that more serum will arrive in the country early next week. He said that the medical corps has set up a prevention program plan to inoculate officers, soldiers, and their families.

In answer to AL-SIYASAH's question, a famous specialist warned against inoculation with meningitis serum outside hospitals and specialized medical centers and units. He explained that the serum needs to be kept at a

specific temperature, without which it would lose its potency. He said that the capital and regions need millions of serum units, making it necessary to take immediate precautions to avert the danger of the situation.

AL-SIYASAH notes that 135,000 citizens were inoculated between 1 February and early March. The department of preventive medicine is preparing complete statistics of those inoculated so far and those still awaiting inoculation.

Case Load Decreases

54004606 Khartoum AL-SIYASAH in Arabic
13 Mar 88 p 3

[Article by 'Adil al-Rih]

[Text] Minister of Health Dr Husayn Sulayman Abu-Salih, in his office yesterday, with Mr Karam Muhammad Karam, representative of the capital, discussed the health situation in the light of the efforts made to fight the meningitis epidemic. The meeting determined the steps to be taken to fight the epidemic, gathering all the resources and coordinating among all the national capital's agencies and the Ministry of Health to control meningitis.

Dr Muhyi-al-Din al-Tayyib, director general of health affairs in the national capital, announced a slight improvement in the health situation in terms of meningitis cases. He said that cases decreased by 20 percent, due to the higher awareness among the citizens and their following of health instructions, in addition to the inoculation efforts made by the ministry. In answer to a question by AL-SIYASAH about the amounts of serum currently available, Dr al-Tayyib said that there were about 300,000 doses available at the ministry and another 300,000 had arrived yesterday from UNICEF. He also added that another half a million doses will arrive on Monday and that more would be arriving soon from the Arab Republic of Egypt. He made it clear that the serum situation was not cause for concern.

Dr al-Tayyib added that 1,078 meningitis cases had been observed in the capital so far, and that about 400,000 people had been inoculated. He noted that the citizens were responding to the inoculation center calls for vaccination, assuring the continuing efforts by the ministry to completely control the epidemic. He said that the preventive doses and serums were now available at all inoculation centers and, due to the great demand of the citizens for inoculation, it was decided that 11 new centers would be opened in the national capital. This would increase the number of vaccination centers to 18, putting on the average 6 centers apiece in Omdurman, Khartoum North, and Khartoum. There will also be vaccination campaigns in some neighborhoods of the 3 regions. He added that the hours of operation at the vaccination centers will be 7:30 a.m. - 2:00 p.m., and that the vaccine provides immunity for 3 years.

AL-SIYASAH also learned that Dr Jalal Ushi, deputy minister of health in the Kingdom of Saudi Arabia, phoned Dr Husayn Julayman Abu-Salih yesterday and informed him that the kingdom and the Custodian of the Two Holy Mosques will support the Sudan's efforts against meningitis by sending serum and medicines within the next few days.

TUNISIA

Locust Hordes Invade Southern Regions: Measures Taken

Four Governorates Affected

54004605a Tunis LA PRESSE in French 18 Mar 88 p 4

[By K. B.]

[Text] Originating in northern Mauritania, eastern and southern Morocco and southwestern Algeria, hordes of locusts invaded Tunisia Monday and Tuesday, crossing the Algerian border between the border posts of Rgim Maatoug, Hazoua and Tamaghza.

So far, the Ministry of Agricultural Foodstuff Production reports, the invasion has been confined to a single swarm. However, it is estimated that one swarm may number anywhere between 40 and 80 million locusts.

Sources say that the locusts are mainly found in the governorate of Gafsa. They spent Tuesday night at Moulares and Redeyef and part of the swarm landed by the Gafsa oasis.

The evolution of the swarm has been difficult to determine, reports say, but surveillance continues at Rgim Maatoug and an invasion by another swarm is anticipated.

Given their speed of flight, which may be as high as 20 km a day, several hundred locusts have already been sighted by Menzel El Habib, in the governorate of Gabes, and in the governorate of Kasserine, moving in the direction of nearby governorates.

Strategy

The Ministry of Agricultural Foodstuff Production expected to go on the "offensive," we are told. A strategy designed to fight the plague was set up as early as September, in cooperation with bordering governorates. Each of them organized teams of Land Rovers equipped with dusters and trucks to haul the insecticide to be used. The first ground operation was followed by another in the air.

In the governorate of Gafsa, reports say, teams have already completed an initial treatment on Tuesday night and another using HCH (an insecticide banned in Tunisia and later reintroduced on an exceptional basis), using searchlights salvaged from mines in the region.

The operation continued until 1100 hours yesterday morning. At the same time, plans were completed to send three planes from the National Plant Protection Company, along with three helicopters, in order to continue work today.

We have also been informed that technical crews, regional authorities and the Ministry of Defense are now determining the areas in which the locusts are expected to land, so as to continue the treatment. Yesterday morning, Amor Ben Romdhane, secretary of state to the minister of agricultural and foodstuff production, paid a visit to the governorate of Tataouine, where he observed the situation in Borj El Khadra and witnessed measures taken to fight the plague.

In addition, the ministry is calling attention to the danger of consuming locusts sprayed with HCH.

Army Helicopters Put To Use

54404605a Tunis LA PRESSE in French 18 Mar 88 p 4

[Text] Acting on instructions from President Zine El Abidine Ben Ali and in keeping with his concern for fighting the locust plague that has struck certain areas of southern Tunisia, particularly the governorates of Gafsa and Tozeur, Prime Minister Hedi Baccouche presided over a working meeting at the Palace of Government in La Kshbah yesterday afternoon. Attended by several members of the government, the meeting was devoted to an examination of efforts being made by regional authorities in cooperation with citizens and specialized technical departments and with the support of the National Army in fighting the plague and neutralizing its harmful effects.

It was decided at the meeting to intensify means already mobilized through the allocation of new logistical support, both in the air and on the ground, mainly specially equipped Army helicopters.

Those attending the meeting also reviewed the results of contacts made with other brother and friendly nations. They noted with satisfaction those countries' willingness to add their aid to our national effort.

They also reviewed consultations with Maghrebian nations affected by the plague, consultations that led to an agreement to hold a meeting of ministers concerned on 22 March in Tunis, for the purpose of coordinating the fight.

Cooperation With Libya Urged

54004605a Tunis LA PRESSE in French 18 Mar 88 p 4

[Text] In Borj El Khadra Wednesday, Amor Ben Romdhane, secretary of state to the minister of agricultural and foodstuff production, inspected areas totaling an estimated 100 hectares ravaged by locusts and learned of efforts being made to fight the plague.

He also headed a working meeting with the Libyan secretary for agrarian reform and the secretary of the General People's Committee, both of whom had come from Ghedames, an area of Libya also devastated by locusts.

On that occasion, the two countries reviewed the situation in areas hit by locusts since 8 March in Tunisian and Libyan territory.

"The locusts came from the Algerian region of Essakf, with a density of 100 larva per square meter," they reported.

The Libyan secretary for agrarian reform noted that Libyan technical personnel have organized a campaign using special aircraft to fight the plague over an area of 600 hectares.

Amor Ben Romdhane expressed Tunisia's determination to consolidate cooperation between the two countries in order to wage an effective fight against possible locust plagues.

They emphasized the need to exchange information, step up nation and regional coordination and simplify means of communication between the parties involved.

Amor Ben Romdhane also suggested calling a meeting with the Maghrebian minister of agriculture in order to combine efforts and fight the plague more quickly and effectively.

Yesterday morning, Ben Ramdhane went to the Gafsa region, where large invasions of locusts from Algeria have been reported.

Early in the morning, he inspected Mourlares, where he learned the size of the locust swarms and held a meeting with members of teams organized to fight the plague.

The secretary of state also learned of logistical means used in fighting the plague: dusting equipment, helicopters and aircraft specializing in the fight against locusts.

11464/9274

Nationwide Study Reveals AIDS Threat Insignificant

54004605b Tunis LA PRESSE in French 1 Mar 88 p 6

[By Brahim Oueslati]

[Text] Since July 1987, 150,000 Tunisians have been examined as part of an AIDS detection study. Only about 90 cases tested positive, including 17 persons already suffering from the disease, one of the lowest percentages in the world. The conclusion: the Tunisian population is healthy and has nothing to fear.

An AIDS study was undertaken by the Pasteur Institute 2 weeks ago. The search for HCV antibodies involved some 5,000 persons, generally representing a real sampling of the Tunisian population in the age group between 20 and 40. All examinations revealed that the population studied tests negative, meaning that those persons have not come into contact with the virus. Such results are logical because surveys conducted since July 1987 at blood banks involving nearly 150,000 persons (in order to prevent the virus from being transmitted through blood transfusions) have shown that the Tunisian population is disease free. These same results were confirmed by the National AIDS Committee. The few cases found—between 80 and 90, with 17 already suffering from the disease—are persons who have traveled abroad. They are high-risk subjects (prostitutes or homosexuals) who contracted the virus outside the country and who were infected before being studied.

Whatever the case, the study completed by the National Committee provided a precise idea about the spread of the virus inside the country.

Objectives Achieved

The study achieved two essential objectives. First of all, it confirmed the National Committee's conclusions, to wit, that the Tunisian population is healthy. The sampling is statistically significant because the persons studied come from nearly all regions of the country.

Second, it backed the existing study, which has already proved that the 2 million tourists who came here have not, contrary to what some believe, increased the incidence of the disease.

The technique used—immunoplasmaties—excludes anyone testing negative, meaning all those without antibodies. Questionable cases should undergo a much more exhaustive study using the technique of W. Bloeh. Confirmation comes through even more conclusive tests.

Lack of Sophisticated Equipment

In the early days of the campaign, we were told, the means used turned out to be inadequate and an urgent order for reagents had to be placed to effectively handle the heavy participation. Staffing was also increased. However, we do not yet have sophisticated equipment, which precludes excellent results. Nevertheless, consideration has been given to acquiring new equipment in order to speed up work. Even if some 400 persons can be examined a day (working from 0700 to 220 hours, sometimes without stopping and on Sundays), results are not immediately forthcoming.

If an individual tests positive, he is immediately referred to specialists, who are usually professors trained in contagious diseases and who are members of the National AIDS Committee. These experts complete additional chemical and biological tests. However, it must be noted that a person found to test positive does not automatically have AIDS. Rather, that individual is a carrier and potentially dangerous, for he could transmit the virus to others, either sexually or by blood transfusions. No miracle drugs are yet available. What is most important is to make those testing positive aware of the danger they represent. However, AIDS is a viral disease whose propagation can be halted through rigorous preventive measures.

11464/9274

FINLAND

First Rabies Cases Since 1959

54002468 Helsinki HELSINGIN SANOMAT in Finnish
10 Apr 88 p A7

[Text] Finns who travel to Sweden and Norway would be wise to voluntarily leave their pets at home. Because of confirmed cases of rabies, the two countries have decided to quarantine cats and dogs arriving from Finland. The Norwegian Ministry of Agriculture has announced that the quarantine is in effect beginning Saturday.

Cats and dogs coming from Finland will have to be quarantined for 4 months.

Exporting your pet will require written permission from the counties' veterinary authorities, but getting it would take weeks, so in practice it is better to leave the animals at home.

Rabies, or hydrophobia, has probably spread into western Kymi Province as far as Uusimaa, Heikki Suomus, chief director of the fish and game division of the Ministry of Agriculture and Forestry has estimated.

Suomus fears the disease has spread further than previously thought, and people are therefore advised, for safety's sake, to refrain from using burrow dogs when hunting fox, raccoon dog, and badger in the provinces of Kymi, Mikkeli, Uusimaa, Pohjois-Karjala, and Hame. The advisory is in effect until the epidemiological situation is adequately clarified.

At the same time, however, hunters are especially urged to reduce the number of raccoon dogs they trap, because raccoon dogs have reproduced significantly in recent years.

Elimaki Dog From Ruotsinpyhtaa

The state veterinary institute has confirmed rabies in Iitti and Ruotsinpyhtaa of western Kymenlaakso. The two confirmed cases are the first in Finland since 1959. The Elimaki dog proved to be from Ruotsinpyhtaa.

According to a bulletin issued Saturday by the fish and game division of the Ministry of Agriculture and Forestry, game wardens and officials who monitor compliance with hunting laws recommend the destruction of cats that run loose and dogs that roam unattended.

Hunters who come in contact with the animals they hunt must remember that the most common—and in practice nearly the only—way to become infected with the disease is through a bite. However, the disease can also be contracted if the sick animal's saliva enters a person's wound.

If a hunter is bitten or if he gets on his wounded skin the saliva of an animal thought to be rabid, he should report to a health center.

Because of the rabies situation, the veterinary division of the Ministry of Agriculture and Forestry is now formulating new guidelines, which will be issued Monday. According to Suomus, the area in which dogs must be vaccinated will be considerably expanded westward from the previously defined rabid area, which included only municipalities near the eastern border.

Suomus points out that vaccinated dogs do not develop immunity to the disease until 2 weeks after the vaccination.

Chief director Rolf Berger believes that the necessary vaccine can be obtained from a French manufacturer. If the decision is made to vaccinate all the country's dogs, 300,000-400,000 units of vaccine will be needed altogether.

Vaccinations continue next week in Kymi Province, Mikkeli Province, eastern Uusimaa, and southern Hame.

Treatment for Family That Owned Dog

The death of a dog from rabies led to health checkups on Saturday for residents of Ruotsinpyhtaa's Ruotsinkyla. The family which owned the dog was taken to Helsinki's Aurora Hospital for treatment.

Everyone thought to have had contact with the dead dog is asked to come to the Loviisa Health Center for vaccination. Several persons came to the Health Center on Saturday, and not one of them was found to have been bitten by the dog.

On Saturday, no one from Aurora Hospital wanted to disclose details of the case. "The family is being cared for properly, and the situation is under control," said Jukka Korpela, the doctor on duty.

Veterinarian Anna-Stina Wekman, of Loviisa, urged all residents of the area to keep their cats and dogs on a leash. If there is reason to suppose the cat or dog has been bitten by a rabid animal, the local veterinarian must be notified at once. The same holds true if someone finds a dead wild animal or an animal that behaves peculiarly.

Rabies is a disease of the central nervous system caused by a virus. Untreated, it can result in a person's death.

Principal spreaders of the infection are natural predators such as foxes, wolves, badgers, and raccoon dogs, as well as domestic cats and dogs.

The incubation period of the disease varies from 2 weeks to 4 months.

The animal's behavior generally changes in the initial stage: a venturesome animal becomes timid, and a calm one becomes aggressive. Some run around aimlessly and bite everything that comes their way. The animal's voice may also change.

Rabies in cats most commonly takes an aggressive form. On the other hand, a dog with rabies is more often calm, or the dog may be alternately calm and aggressive.

In general, the symptoms last 3 to 7 days, occasionally as many as 10 days.

12327/06662

FRANCE

New AIDS Statistics Released

54002465a Paris *LE FIGARO* in French
23 Mar 88 p 12

[Text] The AIDS disease also strikes heterosexuals who do not belong to the "high-risk" categories. The latest issue of the Ministry of Health's Weekly Epidemiological Bulletin (BEH) gives a breakdown of the cases observed in this population. As of 31 December, 1987, of the 3,073 cases counted in France since the start of the epidemic, the BEH notes 161 cases of "heterosexual transmission", 271 cases of "undetermined transmission" and 24 cases classified under "other risk factors." This represents 14.8 percent of all AIDS cases.

Of the 161 heterosexual AIDS cases, 78 are foreigners and 83 are French, 33 are women and 50 are men. Of the 83 French nationals with AIDS, 39 have Haitian partners, 8 have bisexual partners and 2 have partners who received blood transfusions. Eight of these people have seropositive partners who do not belong to any high-risk group.

Two hundred seventy-one people fall into the "undetermined transmission" category. This group includes 128 individuals from Africa or Haiti, regions where heterosexual transmission is dominant.

Lastly, the "other risk factors" group includes 24 men: 14 Frenchmen and 10 Africans and Haitians. Eleven of the 14 Frenchmen had contact with prostitutes and three spent time in central Africa.

Though the spread of the AIDS virus in the heterosexual population is now well-established (but still needs to be quantified), the number of French heterosexual cases observed to date remains relatively low.

09825

Report Suggests Students Now More Aware of AIDS Risks

54002465b Paris *LIBERATION* in French
29 Mar 88 p 27

[Text] A study conducted by the MNEF shows that, although students are using condoms more frequently (primarily at the urging of young women), the effect of educational campaigns is uncertain.

For the first time in France, a medical study gives us a glimpse of the status of AIDS infection among students. Conducted at the MNEF health center, it also pinpoints certain changes in their sexual behavior. The study's conclusions, though no substitute for national statistics, raise important questions, such as whether the government's large-scale preventive drives have a real effect on students, and whether heterosexual transmission of the virus is occurring among them.

From February 1987 to January 1988, nearly a thousand students responded to a questionnaire on their love-life, sexual habits, and prophylactic and contraceptive methods. Two-thirds of them volunteered to have their blood tested for the AIDS virus. The first surprise noted by Dr. Emmanuel Maheu, study coordinator, was that: "A substantial proportion of the girls use condoms in addition to their usual contraceptive method, hence, solely to protect themselves against sexually transmitted diseases and AIDS." "This figure," Dr. Maheu emphasizes, "indicates the beginning of a change in attitudes toward the condom, with women becoming educated in its use."

09825

GREECE

Poll Shows AIDS Knowledge Widespread, Fear Low

54002463 Athens *ENA* in Greek 23 Feb 88 pp 28-33

[Article by Giorgos Zotos: "The Greeks and AIDS"]

[Text] How many and who among Greek men and women fear AIDS? How much has this fear affected their behavior (sexual and otherwise)? How many and who are afraid AIDS may become an epidemic? Which social groups are in greater danger, in lesser, or no danger at all? Which measures do men and women consider most appropriate for their protection and what have they started avoiding? What is it that they fear transmits the virus? How do men and women feel about AIDS victims? Compassion? Indifference or condemnation?

A poll conducted by ICAP-Ellas, Inc. and published exclusively in TAKHYDROMOS, gives the answers to all these questions. For 12 days 65 specialists worked to complete the poll. Specifically, 1,000 persons were polled in Athens, Salonica and other places (cities, towns, islands, etc.). Those polled, men and women 15 years old and over, were chosen at random "from door to

door." The sample was proportionately distributed by sex, age group, geographic location, profession and educational background. [Figures in all tables represent percentages]

Men and women fear AIDS to the same degree, but young people 15 to 20 years old fear AIDS more than other groups. Almost half of them (43 percent) have been so terrorized by AIDS that they discount other current diseases. By contrast, those advanced in age are concerned more about cancer and heart disease and less or almost not at all about AIDS.

As a whole the country is informed about AIDS and knows what the disease is. Only a small minority—mostly women—have not heard or read about it. However, the important fact is that all young people and persons up to age 33 are fully aware of AIDS. Among older persons with elementary school education, one out of ten do not know or have no information about the disease.

Only 3 out of 10 people are seriously afraid they may catch AIDS—the men much more than the women, almost half of whom do not pay any attention to the problem. For the young, however, 4 out of 10 in the 15 to 24-age bracket are much afraid of catching AIDS.

Even though the AIDS threat is not something to be ignored, the majority of Greeks do not contemplate changing their sexual behavior. Six out of ten stated that there is no need for them to change behavior and habits despite the risk and this means they have steady and permanent partners. Two out of ten said they have not considered changing behavior, perhaps for the same reason.

Only one out of ten panicked to such an extent as to immediately change sexual behavior, while an equal number are seriously thinking of acting similarly.

An overwhelming majority of women said there was no need for them to change their sexual behavior. Specifically, seven out of ten said they do not face such a situation, while only five out of ten of the men are in the same category. More than seven out of ten people 40 years old and over declared that they do not have to change behavior because they do not have extramarital affairs (if they are married) or because they have permanent partners which rule out any danger. Twice as many men as women have changed or are contemplating changing behavior.

The AIDS threat affected youth the most. Of those asked, three out of ten have changed or are changing behavior; four out of ten feel they have no reason to change their sexual life; and only three out of ten will take the risk even though they well recognize the AIDS danger.

—Protection measures: The first and apparently most effective measure is the proper choice of a partner. Others, in their order of importance, are: the use of condoms by men, avoiding homosexuals and their hang-outs, taking preventive AIDS tests and avoiding blood transfusions whenever possible.

—Seven out of ten of those polled believed in choosing partners carefully. Among men the percentage reaches about 80 percent, while only 50 percent of the women do so perhaps because most of them have permanent sex partners. The impressive fact is that no one rejects the method of carefully choosing a partner or states that he does not intend to apply it.

—Almost all young people said they are choosing their partners carefully. Among those 15 to 24 years of age, nine out of ten said they apply this principle very strictly. In the 25 to 39 age bracket the percentage of 70 percent is smaller but nonetheless impressive, while those over 40 do not seem to have a problem since 60 percent replied that this method of choosing a partner does not concern them. As shown by prevailing conditions, the use of the condom is the second-ranked method chosen, mostly by men, to attempt to avoid AIDS. Seven out of ten men, that is, an overwhelming majority of the erstwhile stronger—but now terrorized—sex, use the condom.

—Most of the Greek population believes that homosexuality is the most basic way of AIDS transmission. Ninety percent believe so regardless of whether they live alone or with a partner and regardless of occupation or profession. Those residing in Athens and in other urban centers believe in this version more than those in Salonica.

Intercourse with a person of the opposite sex is less dangerous but not devoid of danger. Eight out of ten believe so whether they live alone or with a partner and regardless of their occupation or profession. In Salonica, six out of ten believe so.

—Almost all Greeks believe that sharing needles with drug addicts, homosexuals, or high risk group individuals multiplies the chances of AIDS transmission. This fear is widespread among young people, nine out of ten of whom said that sharing needles is one of the most basic ways of catching AIDS.

—More than eight out of ten are of the opinion that AIDS can be easily transmitted through blood transfusion. Men and people 15-35 years old fear this danger most.

—A plausible number of men and women believe that, despite assurances to the contrary, one could catch AIDS through simple social contact with persons carrying the virus. One out of 10 fear kissing on the cheeks, while 2 out of 10 are afraid to work in the same office with a

TABLE 1

Do You Think AIDS Will Eventually Develop
into an Epidemic Among the Following Groups of our Society?

| For: | All of us | Homosexuals | Drug addicts | Strictly Faithful couples | Persons with Man Many transfusions | Persons Having Multisexual relations | Persons having Extramarital affairs | Hemophiliacs | Doctors and Nurses | Men | Women |
|------------|-----------|-------------|--------------|------------------------------|---------------------------------------|---|--|--------------|--------------------|-----|-------|
| Likely | 46 | 94 | 93 | 11 | 76 | 88 | 75 | 72 | 35 | 50 | 46 |
| Unlikely | 42 | 2 | 3 | 81 | 14 | 6 | 18 | 11 | 49 | 32 | 36 |
| Don't Know | 10 | 4 | 4 | 8 | 10 | 6 | 7 | 17 | 16 | 18 | 16 |

The majority of Greek men and women fear that an AIDS epidemic may develop in groups internationally characterized as "high-risk groups." Thirty percent of those polled expressed concern for doctors and nurses because of their work and the general impression is that the danger among men is greater.

TABLE 2

In Your Opinion, What is the Most Urgent
Problem Our Country Faces Today?

| | Total | Men | Women |
|---------------|-------|-----|-------|
| Cancer | 38 | 37 | 39 |
| AIDS | 25 | 25 | 25 |
| Heart Disease | 18 | 20 | 17 |
| Narcotics | 9 | 10 | 8 |
| Others | 3 | 1 | 4 |
| Don't Know | 7 | 7 | 7 |

TABLE 3
Have You Heard About the Disease Known as AIDS?
(Acquired Immunity Deficiency Syndrome)

| | Total | Men | Women |
|-----|-------|-----|-------|
| Yes | 95 | 98 | 93 |
| No | 5 | 2 | 7 |

TABLE 4
How Much Are You Concerned That
You May Catch AIDS?

| | Total | Men | Women |
|-------------|-------|-----|-------|
| Not at all | 42 | 37 | 47 |
| Much | 25 | 27 | 24 |
| Little | 20 | 22 | 17 |
| Very Little | 13 | 14 | 12 |

person carrying the AIDS virus or using the same drinking glass. However, most of those polled (particularly in Athens) do not fear catching AIDS through simple social contact.

—Many people are skeptical about the “innocence” of...mosquitos. Only 50 percent believe the mosquito bite is dangerous while about 30 percent consider it as one of the ways for AIDS transmission and 20 percent refuse to give an answer.

—Nearly 90 percent of the population, regardless of sex, age, and educational background, underlined that compassion must characterize our attitude toward AIDS victims while less than 10 percent felt differently.

—Sixty percent are of the opinion that AIDS victims should blame themselves for the condition they are in. This position is taken mostly by women and others even though they express compassion for these victims.

—Eighty percent think that those who suspect that they may have been inflicted with AIDS should undergo blood examinations.

—The sentiment of compassion for AIDS victims is not a simple figure of speech. Five out of ten of those polled said they would not hesitate to work side by side with someone they knew to have AIDS, while four out of ten refused to even discuss such a possibility, even though they are among those who said we must be compassionate toward AIDS victims.

These are mostly women, the elderly and individuals of inferior education. By contrast, a high percentage of those who said they would work side by side with an AIDS victim are men, persons 35-39 years old and a very high percentage (70 percent) are those with higher education.

A relatively new disease, AIDS found the Greek state unprepared and as a result there exists today a serious legal gap concerning the rules dictating the relationship between an AIDS victim and his fellow man—a gap which, all legal circles agree, must be closed by legislating special regulations.

Up until now the state faced the problem of AIDS suffers on the basis of public health rules and existing laws. Thus, AIDS victims are referred to a medical board for a convalescence leave which is extended to 2 years since AIDS is an incurable illness and because the same gap problems exist in work places or elsewhere any time a fellow worker or employee is found to have AIDS.

How can these problems be solved? What can the enterprise employing such a person do and what are the rights of the working people? The answer to these questions are given by lawyer Leon Pavlopoulos:

“No legal regime exists for those unfortunate citizens who are inflicted with AIDS. But their legal protection exists and any other arrangement must be based on scientific knowledge about the danger an AIDS patient presents.”

TABLE 5

People are Taking Protective Measures
to Minimize the Danger of Catching AIDS.
Have You Applied Any of the Following?

| | No to Homosexuals | | | Use of Prophylactics | | | No to Transfusions | | | Choice Of sex partners | | | Preventive AIDS tests | | |
|---------------------|----------------------|----|----|-------------------------|----|----|-----------------------|----|----|---------------------------|----|----|--------------------------|----|----|
| | T | M | W | T | M | W | T | M | W | T | M | W | T | M | W |
| I have or will | 58 | 62 | 52 | 62 | 72 | 43 | 43 | 39 | 49 | 68 | 75 | 53 | 44 | 47 | 38 |
| I do not intend to | 6 | 3 | 13 | 17 | 14 | 20 | 29 | 30 | 28 | 3 | 3 | 3 | 35 | 33 | 38 |
| I don't know | 36 | 35 | 35 | 21 | 14 | 37 | 28 | 31 | 23 | 29 | 22 | 44 | 21 | 20 | 24 |
| I don't have AIDS } | | | | | | | | | | | | | | | |

Key: T = Total; M = Men; W = Women

TABLE 6

Which of the Statements Below
Applies to Your Case?

| | -----Age----- | | | | | |
|--|---------------|-----|-------|-------|-------|-------------|
| | Total | Men | Women | 15-24 | 25-39 | 40 and over |
| Despite the AIDS risk I need not change behavior | 61 | 52 | 70 | 37 | 51 | 75 |
| I have not thought of changing behavior | 20 | 23 | 18 | 28 | 24 | 15 |
| Because of the risk I changed behavior | 10 | 13 | 6 | 16 | 14 | 5 |
| I'm seriously thinking of changing behavior | 9 | 12 | 6 | 19 | 11 | 5 |

TABLE 7
From Each One of the Cases Below Tell Us
if This is or is Not the Way to Catch
AIDS From Someone Who Has AIDS

A. This is a way to catch AIDS:

| | Intercourse with person of same sex | Sharing needles | Intercourse with opposite sex | Blood Transfusion |
|------------|---|--------------------|-------------------------------------|----------------------|
| It is | 92 | 92 | 86 | 86 |
| It is not | 3 | 3 | 9 | 7 |
| Don't know | 5 | 6 | 5 | 7 |

B. This is not a way to catch AIDS:

| | Kissing on Cheeks | Working Together | Using Same Glass | Coughing or Sneezing | Insect Bite |
|------------|----------------------|---------------------|---------------------|-------------------------|----------------|
| It is | 11 | 19 | 19 | 20 | 27 |
| It is not | 75 | 71 | 66 | 65 | 51 |
| Don't know | 14 | 10 | 15 | 15 | 22 |

TABLE 8

Do You or Do You Not Agree With the
Following Statements on AIDS?

A. We must be compassionate toward AIDS victims.

| | Total | Men | Women |
|------------|-------|-----|-------|
| Yes | 89 | 90 | 88 |
| No | 7 | 7 | 8 |
| Don't Know | 4 | 3 | 4 |
| Total | 100 | 100 | 100 |

B. They themselves are to blame if they catch AIDS.

| | Total | Men | Women |
|------------|-------|-----|-------|
| Yes | 61 | 59 | 63 |
| No | 27 | 29 | 25 |
| Don't Know | 12 | 11 | 12 |
| Total | 100 | 100 | 100 |

[Question] A private enterprise finds out that one of its working people has AIDS. Does it have the right or the obligation to release him? If it keeps him but does not pass on this information to his fellow workers, do the latter have the right to take legal action against the enterprise?

[Pavlopoulos] The enterprise must weigh the real danger in order to protect the health of the other working people and must release the AIDS victim, paying him some compensation. I must point out that the patient is released only after it is proved that his presence at the work place is endangering the health of others. If no danger exists, the company should protect him, should not make public his condition, and should, moreover, help him morally and materially in his therapy.

If the enterprise is convinced the AIDS-inflicted person is of no danger to others, then his co-workers have no legitimate reason to turn against it for the stand it has taken, since none of their legal rights is violated. They can be legally justified for such action only if the enterprise's board of directors show negligence or indifference to a sick person whose presence in the work place presents real danger to others.

The same answer, based on the same reasoning, can be valid also in the case of a student attending classes when found to have AIDS.

[Question] Has the state the right to forbid a marriage license when one of the two persons carries the AIDS virus or has AIDS? Does it have the right to ask for a health certificate before it issues a marriage license just as it asks for a Rh factor blood test?

[Answer] Such a health certificate is indispensable. The state has the right and must ask for it. It cannot, however, forbid a marriage if the two persons (one of whom has AIDS) know the degree of danger to their health and yet agree to marry. No question arises for those who are just carriers of the virus. Their marriage should not be forbidden.

7520/12913

IRELAND

Record Per Capita Number of AIDS Births in Ireland

54500134 Dublin IRISH INDEPENDENT in English
31 Mar 88 p 9

[Article by Jerome Reilly: "Our AIDS Babies Crisis Worst in EEC"]

[Text] Ireland now has more babies born with AIDS antibodies per head of population than any other European country. In all 38 babies are HIV positive in the Dublin area and two have developed full blown AIDS.

Because of their plight these babies could possibly provide scientists with vital answers on how to manage and treat the deadly virus.

Yesterday, a 500,000 appeal was launched to enable AIDS researchers to follow the course of the disease among the unfortunate babies.

Professor Irene Hillery of UCD said today: "Another unique feature is that AIDS infected mothers in this country are sometimes giving birth to more than one child." Other EEC countries offer abortion and sterilisation to AIDS mothers immediately.

"We want responsible companies to come forward with donations and not wait until they know someone who has the disease," Professor Hillery aid. "The tragedy is that in a few years time everyone will know someone who is HIV positive," she added.

One of the fund-raising efforts envisaged is a major event to be organised with the help of multi-millionaire record company boss, Richard Branson, who has told the leaders of the "AIDS Fund," that he is willing to help.

Elizabeth Taylor, the British screen star, has also expressed a willingness to come to Ireland following contact made with her by board members.

/12232

New Campaign Against Disease in Cattle 54500133 Dublin IRISH INDEPENDENT in English 31 Mar 88 p 9

[Article by William Dillon, Agricultural Correspondent]

[Excerpt] A new 180m plan over 4 years to tackle TB and brucellosis in Irish cattle herds, was formally announced yesterday by Agriculture Minister Michael O'Kennedy.

The plan, which actively involves the Department of Agriculture, farming organisations, and vets in a new management structure, aims to halve the present level of bovin TB by 1992.

The new scheme gets under way next week, with a guarantee that every herd owner will have their animals tested each year, and high risk herds every 6 months.

The long-awaited plan, the subject of much controversy between the department, the farmers and vets—is the most organised attempt yet in the costly 30 year saga of bovine TB eradication in Ireland. To date, an estimated 1,000 million has been spent in trying to stamp out the disease.

The minister said that 1988/89 eradication programme, to begin on 4 April, would be "exceptionally comprehensive," and the most clearly focused on difficult herds and areas since the scheme began.

A programme on the same scale and timing would be repeated in the following years of the 4-years plan, he pledged.

/12232

ITALY

100 Percent Death Rate Among Infants With AIDS

54002474c Rome L'UNITA in Italian 12 Apr 88 p 6

[Text] Rome—Twenty-two infants with AIDS, born of seropositive mothers and studied by the Superior Institute of Health, are dead, 24 months after diagnosis, a death rate of 100 percent. Minister Donat Cattin revealed this in a report to the Senate on the Institute's program.

Until now, epidemiological investigations conducted on high-risk adults have confirmed that education and information are the only valid instruments for controlling the disease.

Only 15 to 20 percent of 677 homosexuals studied in Rome since 1983 are seropositive: in fact, the homosexual community has always used sharing of information and self-control as preventative methods. Drug addicts are confirmed as the population most at risk, while the role of the secondary Hepatitis B virus infection in the clinical evolution of seropositive subjects is also under study. Lastly, a study of hemophiliacs to ascertain the efficacy of treating blood derivatives with heat, a necessary treatment for these patients, is under way. There have been 1,355 inspections of pharmaceuticals, 2,118 foodstuff investigations, and 53 inspections made for issuing authorizations for the collection and therapeutic transplant of organs, involving above all the cornea, the liver, the pancreas, and the kidney.

13328/06662

Armed Forces Reports 121 AIDS Cases

54002474a Rome L'UNITA in Italian 8 Apr 88 p 6

[Text] Rome—One hundred twenty-one cases of HIV infection have been recorded among the military, but no apparent cases of AIDS. The disease is spreading but at a rate equal to that found in the civilian population. Eighty-three percent of the contagious cases are linked to drug addiction (as compared to 60 percent in the outside world) but that percentage is due to the age of the group under examination. They are almost all young people. These are the results of an investigation by the Military Health Service which states that until now the tests have

been given only to high-risk subjects, because an experiment in Pavia reportedly does not prove the usefulness of mass screening. Of the 121 cases, over 46 have been discovered in Lombardy, followed by the Veneto Region and Puglia at a distance with 10 cases each and Emilia with 9.

According to the general director of the military health service, Admiral Agostino Di Donna, the test is being given to drug addicts, homosexuals, transfusion recipients and military personnel returning from missions in countries where AIDS is more widespread. There are two general screenings: during the conscription physical and upon reporting for duty. For the present, there is no provision for exemption from military service for those who are seropositive. They are expeditiously assigned to a very low category, the fourth, under the assumption that their physical condition is not good enough to withstand the stress associated with military service. Currently a surplus of young men guarantees that none of these individuals serves in the military, but the problem will have to be dealt with before 1992 when the effects of a demographic decrease will lead to calling up young men from even the lowest categories. In the meantime the Military Health Service is considering the benefit of testing all military who have had sexually-transmitted diseases and all those making a career in the military.

"For now, this is only a possibility being considered on the scientific level," Di Donna stated, "before eventually being submitted to the will of the political authorities."

However, the military health service is emphasizing prevention above all: [through such measures as] pamphlets distributed upon entering duty, information about unit health facilities, and free prophylactics for anyone who requests them.

13328/06662

Research Shows AIDS Minimal Among African Immigrants

54002474b Rome L'UNITA in Italian 10 Apr 88 p 6

[Article by Anna Morelli]

[Text] Rome—For them, Rome is an immense anonymous waiting room, in which they stay for an average of 3 to 4 years. Alone, without a job, often with only the shirt on their backs and the mirage of reaching Canada, Australia or the United States, 100,000 illegal immigrants, mostly African, have been suffering additional oppressive discrimination. They are suspects of bringing in AIDS.

The phenomenon of the great exodus,—for which Rome is a transit center—ignored by the Italian Government and tolerated by the European Communities, is in reality a serious problem. [Moreover,] last year's health law has barely scratched the surface of [this problem]. The First

International Conference on Medicine and Migration, organized by the Department of Mental Health of La Sapienza University in Rome and the Fernando Rielo Association, had as its goal the idea of presenting different experiences and sensitizing a misinformed public opinion, out of touch with reality and often fraught with strong prejudices.

Studies, research, and analysis conducted by volunteers and conscientious objectors assigned to the association, in collaboration with psychiatrists Frighi and Cuzzolaro from the university, are sweeping away many common arguments against the foreign migrant peddlers in our country, who find the Caritas Welcome Center their only reference point, as they disembark with a tourist visa at Fiumicino. Here, in order to obtain a card giving them access to meals, illegal aliens must submit to a medical examination. The clinic, in operation for the past 5 years, has treated 10,000 people from 76 different nations, and carried out 30,000 medical examinations.

This has led to the drawing up of a composite of the typical illegal immigrant and to a deeper understanding of some trends relating to their physical and mental health. It is a young black man, between 20 and 29 years of age, originating above all from Eastern Africa (Ethiopia), with no help or support, who stays in Italy for 3 to 4 years, the time necessary to obtain a visa for one of the three most desirable countries, Canada, Australia, or the United States. The hope of leaving as soon as possible does not foster integration, but the long period of forced residence does however give rise to the need for assistance and medical care. The only care offered is at the Caritas clinic, staffed exclusively by volunteer doctors and paramedics. As for status as political refugees, only citizens of Eastern Europe, Iran, Iraq, and Vietnam can request it (according to the geographic limits established by Italy in 1951).

The Department of Mental Health, which in 2 years has interviewed 750 illegal aliens from among all those who frequent the Caritas mess halls, has ascertained that no one is illiterate, that 70 percent have completed middle school and that among the Ethiopians (who are the majority), over 25 percent have degrees in a scientific area. This is one of the surprising facts presented at the Conference. However, illegal immigrants, already carriers of endemic diseases or illnesses which have disappeared from Italy for some time, are exposed to diseases of psychophysical impoverishment. Furthermore, the psychiatric study found that the migration process involves the better [socio-economic] strata of the population, the best equipped, and the most enterprising and that the trauma of life as an illegal immigrant brings with it a very negligible incidence of serious psychiatric disorders.

We now turn to [the subject of] AIDS. Between November 1986 and September 1987, 945 subjects submitted to voluntary screening out of 1,895 who thronged to the clinic: 79.4 percent from Africa, 9.7 percent from Asia, 9

percent from Europe (Poland), and 1.9 percent from America. Of the 945 only 8 (4 men and 4 women, .84 percent) tested positive for HIV: 1 European and 7 Africans. None of these came from Ethiopia: one from the north, three from Central Africa, three from the west. Another surprising fact: the spread of the HIV infection among the African immigrant population is extremely low; however, no one has bothered to clarify this. And once identified, the seropositive individuals continue to be the responsibility of a volunteer association.

13328/06662

NORWAY

Fewer Infected With Aids, but Youth Avoid Condoms

HIV Positive Number Stable

54002475b Oslo AFTENPOSTEN in Norwegian
9 Apr 88 p 10

[Article by Erik Sandersen]

[Text] Norwegian health authorities are now cautiously optimistic about the development of HIV infection and AIDS in this country. Although more tests are being carried out there has been no increase in the number of people testing positive for HIV infection. As of 1 March of this year, 669 people had been diagnosed as HIV positive.

"To date, 180,000 individuals have voluntarily undergone testing in this country. In 1985 around 1,000 people were tested a month. In 1986 the figure increased to 1,800, in 1987 9,000 people came in for testing and in the first 2 months of this year, as many as 20,000 people were tested for HIV infection each month. But the increased test activity has not led to an increase in the number of HIV-positive results," said medical director Arve Lystad of the State Institute for Public Health. The figure has remained stable at around 20 cases per month.

"But we must be careful about being too optimistic. A decrease was noted in several other diseases that are also transmitted through sexual contact, such as hepatitis B, gonorrhea and syphilis, since 1985, but last year the figures rose again," said medical director Arve Lystad. "So we must be very careful that we don't let down our guard just because we see a positive trend," he said.

As of 1 March, 669 people had been diagnosed as HIV positive. But the real figure probably lies somewhere between 2,000 and 3,000. Medical Director Lystad says this means that we must put more emphasis on tracing the infection so that we can find most of those who are HIV positive as soon as possible.

Youths' Practice Still Risky

Oslo AFTENPOSTEN in Norwegian 15 Apr 88 p 14

[Article by Elisabeth Sem Christensen]

[Text] When young people get into bed, they lose their common sense and forget what they know about AIDS and HIV infection: A disturbingly small number use condoms—in spite of all the campaigns. Between 5 and 10 percent of heterosexual young people lead risky sex lives, according to the first big survey of young people in Gjovik between the ages of 19 and 24. And it is unlikely that young people in Gjovik are either better or worse than other Norwegians in their age group.

Only 17 percent had used condoms the last time they had intercourse. Over half of all those who were not married never use this form of contraception—which experts believe is also the best protection against HIV and venereal disease. Only one out of four unmarried youths frequently or always used condoms. Most think it is embarrassing to buy them.

And it is not because they don't know any better. The Gjovik survey, in which around 650 young people were interviewed during the 1987 Christmas season, shows that there is a high level of knowledge about HIV and AIDS. They answered almost everything "correctly." Knowing about it is one thing, but acting on that knowledge is quite another matter.

Nine Million Condoms

We asked health director Torbjorn Mork if the public condom campaigns have been a failure.

"No. The use of condoms has increased sharply. Many people also live in a stable relationship with one other person. But it is too bad if we fail to reach the high-risk group of young people who change partners frequently."

In 1984, 6 million condoms were sold in Norway, last year the figure was 9 million. Nothing definite is known about who is responsible for the increased sales.

It is a general problem in all health campaigns that knowledge is not always followed up by action, according to Mork. Specialist Svein Erik Ekeid added that it is impossible to turn the entire population of Norway into "models of virtue" in the space of a few years. Often people do not change their behavior before they see a problem at close range. Then they dredge up what they know and make use of it, Ekeid said.

We asked health director Mork if there were other steps that could be taken instead of campaigns.

"It is hard to think of any. We must try to mobilize a general feeling of responsibility. We can't legislate people's sex lives," Mork said over the telephone. And he added that there are no plans to ban alcohol and discos in the fight against AIDS either.

The group that is most exposed to infection often goes to discotheques and consumes alcohol relatively often, according to the Gjovik study. And the highest risk group involves the 5-10 percent who change partners frequently, seldom use condoms and occasionally engage in casual sex. Four to five percent have had more than two sex partners in the past month. Boys outnumber girls two to one in this category. On the other hand almost half of the young people surveyed in Gjovik said they are more careful about casual sex partners than they were before. Almost two-thirds said they are afraid of being infected with HIV. The fear is greatest among girls. Even so, one out of three boys and one out of six girls said they often or occasionally have casual sexual adventures.

HIV Infected at Work

Although many are anxious about being infected, two out of three young people have nothing against working or studying with someone who is HIV positive. Only 4 percent thought HIV-infected people should stop working. A large majority would like to keep on working if they become infected with the virus. Some 40 percent felt compulsory testing is correct and 30 percent were opposed to the idea.

The young people in Gjovik listed TV and newspapers as their most important source of information about AIDS. The schools played an insignificant role. This group of young people is probably no longer in school, according to the experts behind the survey, which was funded by the Social Affairs Ministry.

06578

Country Closes Borders to Dogs, Cats From Finland in Rabies Scare

54002475a Oslo AFTENPOSTEN in Norwegian 12 Apr 88 p 4

[Article by Erik Veigard; first paragraph is AFTENPOSTEN introduction]

[Text] Kilpisjarvi—At midnight last night the Kilpisjarvi border station and the four other border crossing points between Norway and Finland were closed to all dogs and cats.

From now on dogs and cats that are brought from Finland to Norway must spend 4 months in quarantine. Fear of rabies has led Norwegian and Swedish veterinary authorities to introduce similar bans on bringing dogs and cats in from Finland, where a rabies outbreak has occurred.

After Finnish veterinary authorities informed their Norwegian and Swedish colleagues on Saturday that there was an outbreak of rabies east of Helsinki, it took only 2 hours before Norway and Sweden closed their borders with Finland to dogs and cats. An extension was granted for animals in Finland with a valid 6-week certificate from a veterinarian. But at midnight last night this grace period ran out and from now on dogs and cats that cross the border into Norway must spend 4 months in quarantine before they are declared free of rabies. Attempts to bring animals across the border illegally will be dealt with severely. The reaction will be as serious as the one experienced by tourists from other European countries when they are charged with bringing animals into Norway illegally, namely a fine of several thousand kroner and big expenses for the period their animals must stay in quarantine.

The five border stations between Norway and Finland in Troms and Finnmark did not experience a big influx over the weekend of people wanting to get their pets across the border before the grace period ran out last night. But some pet owners did cross the border and dog and cat owners did refrain from going to Finland during this period. Even if they had a valid certificate from a veterinarian, it is obvious that they did not want to take the chance of not getting back in time. At the Kilpisjärvi border station there are usually many Norwegians and Finns who take their dogs across the border because the area on both sides of the border is a favorite place for hiking. However this traffic declined over the weekend and now it has come to a total halt. The Norwegian customs director in Kilpisjärvi, Erling Pedersen, said that some Norwegians who were in Finland yesterday called up because of concern that they might not reach the border before last night's deadline, but aside from that they had no problem in introducing the rabies restrictions.

06578

SPAIN

Increased Infant Deaths From AIDS 54002478a Madrid DIARIO 16 in Spanish 14 Apr 88 p 14

[Text] Santander—Dr Lourdes Munoz, associated with the laboratory at Madrid's Carlos III Institute of Health, reported in Santander that, since the appearance of the AIDS disease in Spain, 30 children have died as a result of this syndrome.

This statement was made during a conference held in Santander on the occasion of the Fifth Course in Pediatric Medicine.

Dr Munoz pointed out: "The increase in AIDS cases is more pronounced among children than among adults, and there has been a total of 47 cases, with 30 victims," stressing that, in all instances, the children were those of mothers who were heroin addicts.

2909

Total AIDS Statistics Detailed by Age, Sex 54002478b Madrid DIARIO 16 in Spanish 8 Apr 88 p 12

[Text] Over 1,100 persons, 1,126 to be exact, have the AIDS disease in Spain, according to data from the end of March provided by the Ministry of Health and Consumption. Also, 496 persons in our country have died of that disease to date. The group most stricken consists of males addicted to drugs taken parenterally. Of the 1,126 cases existing in Spain, 955 are men and 171 women.

Madrid—More than 1,100 Spaniards are currently suffering from AIDS, and nearly 500 have died as a result, according to the latest information obtained at the end of March by the Health Ministry, based on the new criteria for the diseases established by the World Health Organization (WHO).

The most impressive, although not surprising fact is that most of the patients belong to the population sector whose ages range between 20 and 29 years, and who are addicted to drugs taken parenterally, that is, using a needle.

Of the 1,126 cases existing in Spain, 955 are men and 171 women. In the case of deaths, the proportion increases even more in the case of men. As of the aforementioned date, 426 men and 70 women had died.

Virtually half of the sufferers, 452 cases, are males between the ages of 20 and 29 years, together with 113 females in the same age bracket.

Insofar as deaths are concerned, the proportion is similar. Individuals between 20 and 29 years old lead the AIDS fatalities, with 188 deaths among men and 43 among women.

Ranking second are persons between 30 and 39 years of age, with a total of 329 patients, 301 of whom are males. In this segment of the population, there were 142 deaths from AIDS, the vast majority of which, 131, involved men.

In third place are individuals between ages 40 and 49, with 103 cases of the disease and 45 deaths, all involving men.

Also, of the 1,126 deaths, the majority, 608, relate to persons addicted to drugs taken parenterally, 443 of which were associated with youths between 20 and 29 years old.

Distribution of Cumulative Cases of AIDS and Deaths
per Age and Sex Segment in Spain as of 21-3-88

| Age Segment | Cases | | | Deaths | | | |
|----------------|-------|-------|-------|--------|-----------|----------|--|
| | Men | Women | Total | Total | Men % | Women % | |
| 0-11 mos | 5 | 9 | 14 | 9 | 4 0.93 | 5 7.14 | |
| 1-4 yrs | 12 | 2 | 14 | 7 | 5 1.17 | 2 2.85 | |
| 5-9 yrs | 8 | 1 | 9 | 6 | 6 1.40 | 0.00 | |
| 10-14 yrs | 9 | 1 | 10 | 8 | 7 1.64 | 1 1.42 | |
| 15-19 yrs | 20 | 8 | 20 | 14 | 11 2.58 | 3 4.28 | |
| 20-29 yrs | 452 | 113 | 565 | 231 | 188 44.13 | 43 61.42 | |
| 30-39 yrs | 301 | 28 | 329 | 142 | 131 30.75 | 11 15.71 | |
| 40-49 yrs | 102 | 1 | 103 | 45 | 45 10.56 | 0.00 | |
| 50-59 yrs | 30 | 6 | 36 | 23 | 20 4.69 | 3 4.28 | |
| Over 60 yrs | 14 | 2 | 16 | 11 | 9 2.11 | 2 2.85 | |
| Total | 955 | 171 | 1,126 | 496 | | 70 | |

Distribution of Cumulative Cases by Age Segment and Risk
Factor in Spain as of 21-3-88

| Risk Factor | HO | | | | | | | | | Total |
|----------------|-----|------|------|-----|----|-----|------|-----|----|-------|
| | HO | ADVP | ADVP | RHD | RT | MFR | PHFR | DES | NI | |
| 0-11 mos | 0 | 0 | 0 | 0 | 0 | 14 | 0 | 0 | 0 | 14 |
| 1-4 yrs | 0 | 0 | 0 | 0 | 2 | 12 | 0 | 0 | 0 | 14 |
| 5-9 yrs | 0 | 0 | 0 | 8 | 0 | 0 | 0 | 1 | 0 | 9 |
| 10-14 yrs | 0 | 0 | 0 | 9 | 1 | 0 | 0 | 0 | 0 | 10 |
| 15-19 yrs | 1 | 15 | 0 | 12 | 0 | 0 | 0 | 0 | 0 | 28 |
| 20-29 yrs | 40 | 443 | 32 | 27 | 0 | 0 | 6 | 17 | 0 | 565 |
| 30-39 yrs | 123 | 142 | 18 | 20 | 1 | 0 | 4 | 21 | 0 | 329 |
| 40-49 yrs | 66 | 5 | 5 | 10 | 0 | 0 | 1 | 16 | 0 | 103 |
| 50-59 yrs | 19 | 1 | 0 | 5 | 6 | 0 | 2 | 3 | 0 | 36 |
| Over 60 yrs | 5 | 0 | 0 | 4 | 7 | 0 | 0 | 0 | 0 | 16 |
| Ages | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 |
| Total | 254 | 608 | 55 | 95 | 17 | 26 | 13 | 58 | 0 | 1,126 |

HO = male homosexual practices; ADVP = parenteral drug addiction;
RHD = reception of homoderivatives; RT = reception of transfusions;
MFR = mother as risk factor; PHFR = heterosexual couple with risk
factor; DES = unknown; NI = no information

Ranking second in the number of sufferers are homosexual males, with 254 patients, most of whom are between the ages of 30 and 39 years.

Also to be stressed are the 26 cases of patients whose mothers are included among the risk factors, having infected children under 4 years of age.

2909

SWEDEN

Rabies Epidemic Near Finnish Border Alarms Nordic Countries

20,000 Dogs Vaccinated

54002471 Stockholm DAGENS NYHETER in Swedish
10 Apr 88 p 6

[Article by Stefan Lundberg, DN correspondent in Helsinki: "Quarantine Follows Alarm Over Rabies"; first paragraph is DAGENS NYHETER introduction]

[Text] Helsinki. The Swedish National Board of Agriculture decided on Saturday to introduce a 4-month quarantine for all dogs and cats from Finland. This follows reports of rabies in Finland.

"The regulation takes effect immediately," said Stockholm County Veterinarian K.G. Linderholm to EKOT. The only exceptions are animals that have been visiting in Finland and are coming home. They are allowed to return through Monday.

But there are also restrictions for these animals. They are subject to declaration to the customs—their owners must also report their names and addresses. They are also included in a mandatory leashing requirement.

Vaccination

More than 20,000 dogs in the border district between Finland and the Soviet Union have been vaccinated in recent weeks following reports of a rabies epidemic on the Soviet side. Authorities have been promised additional vaccine from a French manufacturer, and the vaccinations are being done progressively, beginning in Kymen County where the disease was first encountered.

It is apparent that the rabies disease was already widespread in Finland before the infected animals were found outside of the risk area established by the authorities near the border.

A dog died on 3 April with symptoms resembling rabies, and it was sent, along with several other suspected animals from eastern Finland, to the State Veterinary Medicine Institute which on Friday evening confirmed with a 90 percent certainty that the cause of death was rabies.

According to information received Saturday evening, the family which owned the dead dog was being cared for in a hospital. But there was no positive information that any person was infected.

Leash Requirement

On Monday the authorities are going to issue careful directives concerning the disease. The first advice given by veterinarians over the weekend was that dogs and cats, at least in the high risk area, should remain on a leash. No prohibition against arranging dogshows has been issued yet.

Rabies is considered to be impossible to eliminate in the short term. Once it comes, it is usually here to stay. A human who is bitten by a rabies-infected animal will die if he is not treated immediately. The vaccine should be given immediately after the person in question has been bitten.

The animal symptoms are that it has difficulty swallowing, extensive secretion of saliva, and difficulty in moving. The animal is generally paralyzed before it dies.

Sweden Institutes Quarantine

54002471 Stockholm DAGENS NYHETER in Swedish
11 Apr 88 p 6

[Article by Mats Holmberg and Stefan Lundberg: "No Quarantine Spaces Exist—The Border Closes Tonight"; first paragraph is DAGENS NYHETER introduction]

[Text] The rabies contagion in Finland can inexorably close the door for visiting Swedish domestic animals which tarry there too long. Those which remain past midnight Monday night will probably not be allowed to come home.

Beginning Tuesday the National Board of Agriculture will require a four-month quarantine for all furred animals coming from Finland to Sweden. But just now there are no quarantine spaces available in Sweden, and none are expected in the future.

"In fact one should expect a total cessation of imports," said Stockholm County Veterinarian Karl-Gunnar Linderholm.

About twenty Finnish domestic animals came to Sweden on Sunday in the company of their unknowing owner, and were immediately sent back.

The dog and the fox which caused these measures were found dead of rabies in southeast Finland.

It is still not known whether the rabies infection has really become established in that area, although Bengt Nordblom believes that there are significantly more cases than the two confirmed.

Returning Swedes were passed through the border, but were told to leave their names and addresses.

"We will contact them when we have information from the customs," said the head of the Disease Prevention Unit of the National Board of Agriculture, Bengt Nordblom.

Keep Leashed

"The animals will be kept on a leash for four months, and avoid contact with other animals. We also want to know exactly where in Finland they have been."

The dog which died of rabies and was found in southeast Finland was running around amidst school children in Svensky several weeks before it died. All the school children were immediately called in on Saturday and Sunday for examination. None were found to have any sign of rabies.

"None were bitten by the dog, we are sure of that," said Outi Koponen, the leading doctor at the Health Clinic in Lovisa.

The owner and his family were taken immediately to Aurora Hospital for closer observation, but all are reported to be out of danger.

"We have notified everybody in the area by radio to keep their dogs and cats inside, or keep them tied up," said Koponen.

Mass vaccination of dogs and cats will commence at the beginning of the week when the National Board of Health issues the directive.

The Health Clinic in Lovisa called in all the students and teachers when it was learned that the rabid dog had been running freely around the schoolyard and in the town just before it became ill.

The authorities are now convinced that the rabies infection has spread far to the west of the place where the dead dog was found. A rabies-infected fox was found at about the same time farther to the east.

But even if the area in Finland should prove to be infected, the risk is small that the infection will spread to Sweden.

"Experience in Central Europe shows that the infection can spread by five [Swedish] miles per year," said the former head of the Veterinary and Domestic Animal Division of the National Board of Agriculture, Bengt Henricson. "And we will fight it."

By Foxes

The disease is spread almost exclusively by foxes. In central and northern Finland—and according to Soviet reports, also in the adjoining areas of the Soviet Union—foxes are seldom seen.

"If we should discover rabies in Sweden, there is an agreement with the Swedish Sportsmen's Association to try to exterminate foxes in the area," said Bengt Henricson.

Swedes with dogs and cats were given priority on Sunday evening on the ferries from Finland to go home.

"Nobody who comes too late will be able to blame the shortage of space," said County Veterinarian Karl-Gunnar Linderholm. "And we will strictly follow the regulations."

Actually the same regulations will apply to Finland as to most other countries.

Open Borders

Strong impediments to the import and export of furred animals apply to all countries except Finland and Great Britain, both rabies-free as is Sweden. Even Denmark is included in the import prohibition, although there have been no reports of rabies there for seven or eight years.

That is because Denmark, because of its membership in the EC, has been forced to open its borders to strongly-rabies-infected West Germany.

"Our drastic measures toward Finland are due to international agreements," said Karl-Gunnar Linderholm.

"We must be strict if our agreements with, for example, Norway and Great Britain are going to be upheld."

The decision to give Swedish animal owners in Finland a grace period for their travel home until Monday has met with troubled reactions in Norway.

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